

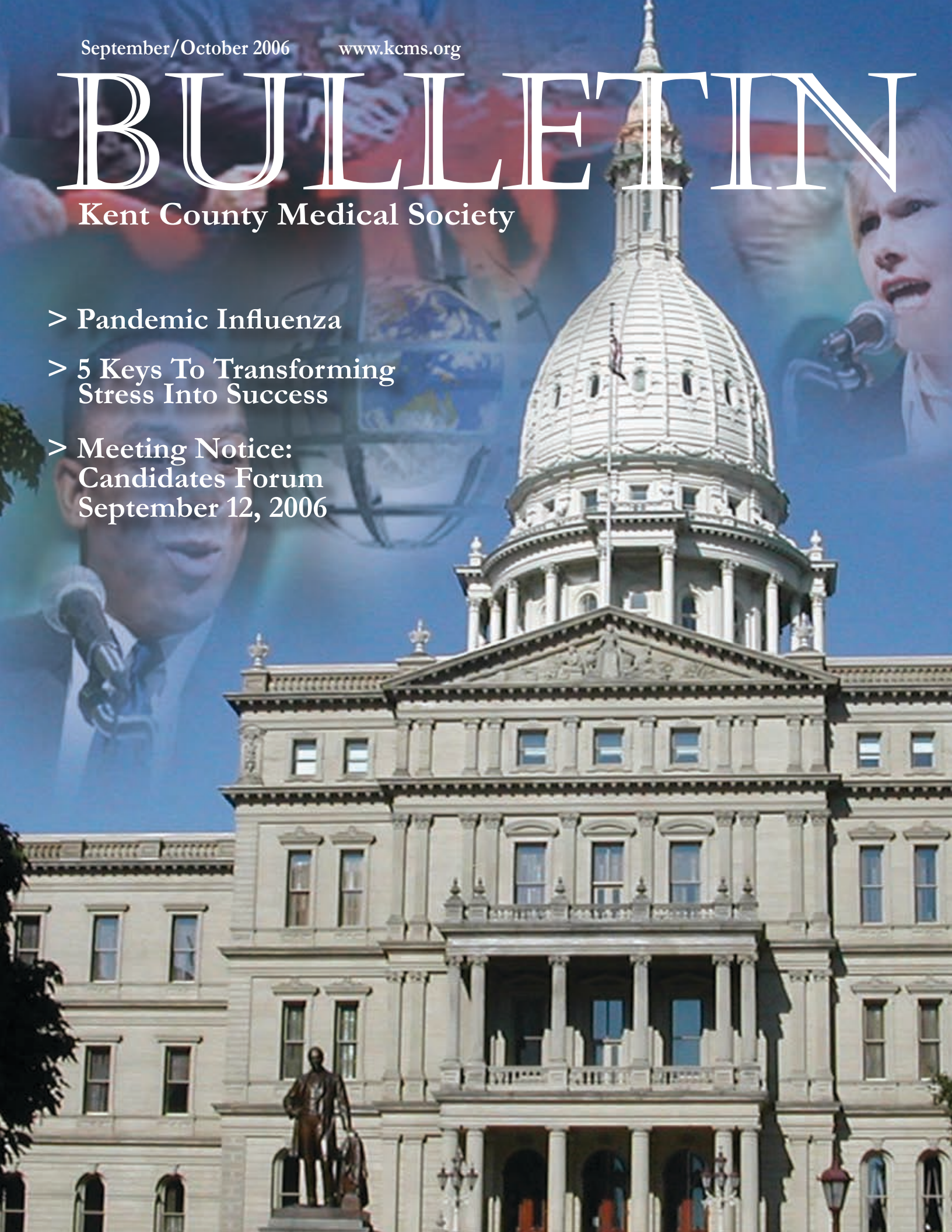
September/October 2006

www.kcms.org

BULLETIN

Kent County Medical Society

- > Pandemic Influenza
- > 5 Keys To Transforming Stress Into Success
- > Meeting Notice:
Candidates Forum
September 12, 2006



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BULLETIN

Kent County Medical Society

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MEETINGS OF INTEREST

Kent County Medical Society

Meetings

LOCAL

SEPTEMBER 12, 2006 - KCMS Candidates Forum

Watermark Country Club

NOVEMBER 14, 2006 - KCMS/KCMS Alliance Joint Meeting

Watermark Country Club

STATE

OCTOBER 25-27, 2006 - Annual Scientific Meeting

Somerset Inn, Troy MI

NATIONAL

NOVEMBER 11-14, 2006 - AMA Interim Meeting

Las Vegas, NV

MSMS DELEGATES AND ALTERNATE DELEGATES

MSMS DELEGATES to January 2007

John H. Beernink, MD
Jayne E. Courts, MD
Wayne L. Creelman, MD
Domenic R. Federico, MD
Judith A. Hiemenga, MD
John H. Kopchick, MD
John R. Maurer, MD
Rose M. Ramirez, MD
Robert C. Richard, MD
Bruce C. Springer, MD

MSMS DELEGATES to January 2008

Anita R. Avery, MD
R. Paul Clodfelder, MD
Michelle M. Condon, MD
Patrick J. Droste, MD
Sal F. Dyke, MD
Richard A. Ilka, MD
Kevin McBride, MD
Khan Nedd, MD
Michael D. Olgren, MD
Brian A. Roelof, MD

MSMS ALTERNATE DELEGATES

to January 2007

Keith Getz, MD
Denise D. Gribbin, MD
David M. Krhovsky, MD
Jay P. LaBine, MD
Amy L. Manley, MD
Judith L. Meyer, MD
Robert E. Reneker, Jr., MD
David M. Reifier, MD

MSMS ALTERNATE DELEGATES

to January 2008

James A. De Haan, MD
Elizabeth Henry, MD
Courtney P. Jones, MD
Mark W. Kemp, DO
Robert A. LaFleur, MD
David E. Randolph, MD
John A. Rupke, MD
Laura VanderMolen, DO
Stephen L. Winston, MD
Phillip G. Wise, MD

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Editor - David M. Krhovsky, MD
Business Manager - Wm. G. McClimans, Jr.

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OF THE
KENT COUNTY MEDICAL SOCIETY
AND
KENT COUNTY OSTEOPATHIC ASSOCIATION

TUESDAY, SEPTEMBER 12, 2006

TOPIC:

CANDIDATES FORUM

THE 6TH KCMS/KCOA CANDIDATES FORUM IS INVITING
CANDIDATES RUNNING FOR THE MICHIGAN SENATE,
THE MICHIGAN HOUSE OF REPRESENTATIVES
AND MICHIGAN GOVERNOR

COME MEET THE CANDIDATES AND ASK QUESTIONS!

SOCIAL 6:15 PM

DINNER 7:00 PM

WATERMARK COUNTRY CLUB
1600 GALBRAITH SE, GRAND RAPIDS

PRESIDENT'S MESSAGE

Kent County Medical Society

Jay P. LaBine, MD

Connection

A few days ago, I met a wonderful man. At the young age of 80 years old, he shined of wisdom and patience. After getting to know one another, we realized we had a few things in common. We both have big families and we both had worked on the farm. He is my patient and I am his surgeon. He was hospitalized with a bowel obstruction.



Like many of us, it's rare I have the time to sit and just visit with patients. Not very often am I able to simply spend time getting to know them. We all have more time demands, more work to be done, more time needed to "document" our "patient encounter". For some reason, he and I connected. I met most of his family, all of whom obviously loved him dearly. They were much more worried about him than he was about himself.

After a few days, it was clear he needed an operation. Worst fears were realized when the findings revealed unresectable recurrent malignancy. As I shared the news with his family and then with him, it was obvious that a strong relationship had developed. We shared a few tears and a short prayer.

The physician-patient relationship is a complex, sometimes over-analyzed yet wonderfully precious thing. Retired physicians often say, "I miss being with patients."



Every physician can remember those patients with whom they have connected in a special way. Some have been quirky, some charismatic, some inspiringly humble. Our patients don't look at us as their "providers". They see us as their doctor. Someone who can give comfort, healing relief from a problem they just don't understand.

Every physician can remember those patients with whom they have connected in a special way.

We educate, counsel, guide and encourage them back to health. If not back to health, then to a better understanding of what's happening to them. It is through this relationship that we as physicians gain strength. Perseverance to attend to that last detail, volunteer for that committee and the million other things we do to improve care for our patients.

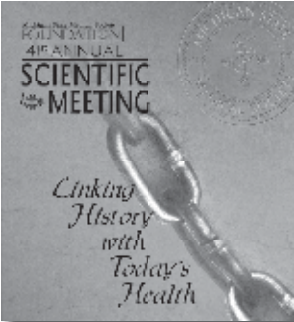
The medical society fiercely and intensely fights to preserve, strengthen and protect the physician-patient relationship. There are many powerful forces that weaken this relationship. We as physicians and members of organized medicine should be mindful of the joy and privilege to be able to participate in this relationship. As we work to provide optimal medical care to all the patients we see each day, let's take a bit of time to simply enjoy that person and our relationship.

REGISTER NOW!

Michigan State Medical Society
FOUNDATION

141st ANNUAL

SCIENTIFIC MEETING



Wednesday–Friday
October 25–27, 2006
Somerset Inn, Troy, MI

www.msms.org/eo/asm/asm.html

For more information or to register, please contact Brenda J. Marenich at 517-336-7580 or bmarenich@msms.org.

Wednesday Morning, October 25

All morning courses run concurrently from 8:30 a.m. to 12:00 p.m.

- Dermatology Update 2006
- Urology for the Non Urologist
- Current Therapy for Management of Type 2 Diabetes Mellitus
- Women's Health Update – Part I
- Protecting Your Practice from New and Emerging Liabilities

Wednesday Afternoon, October 25

All afternoon courses run concurrently from 1:30 p.m. to 5:00 p.m.

- Trusting Your Gut: Reactions to Partner with Patients
- Reconstructive Plastic Surgery
- Hypertension and Diabetes: The Rocky Road to Chronic Kidney Disease
- Women's Health Update – Part II
- Cardiology Update: Preventive Cardiology 2006: New Issues, Continuing Challenges

Thursday Morning, October 26

- "Early Bird" Plenary Session – 7:00- 8:00 am
The Physician's Role in the Worker Health – 2000 and Beyond:
A Prescription for Prevention (No Fee)

All morning courses run concurrently from 8:30 a.m. to 12:00 p.m.

- Multi-factorial Evaluation, Treatment and Prevention of Falls in Older Adults: An Evidence-Based Approach
- What's New in Urology: 2006
- Multiple Vaccine Changes: How Do You Keep Up?
- Frequently Encountered Neurological Problems
- Disc Replacement and New Motion Preservation Techniques in Spine Surgery



The Michigan State Medical Society (MSMS) is accredited by the Michigan State Medical Society Committee on CME Accreditation to provide continuing medical education for physicians. The MSMS designates this educational activity for a maximum of 21 AMA PRA Category 1 Credit(s)[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Thursday Afternoon, October 26

All afternoon courses run concurrently from 1:30 p.m. to 5:00 p.m.

- The Chronic Care Model in Primary Care
- Radiology Update for Physicians
- An Overview of Opioid Maintenance Analgesia
- Risk Communication/Assessment for the Primary Care Physician
- Ophthalmology for Primary Care Providers
- Preparing for Pandemic Influenza

Friday Morning, October 27

- "Early Bird" Plenary Session – 7:00- 8:00 am
Perspectives in Preventive Cardiology (No Fee)

All morning courses run concurrently from 8:30 a.m. to 12:00 p.m.

- Update in Infectious Diseases
- Update in the Conservative Management of Back and Neck Pain
- Rheumatology Today: Present Practice in Diagnosis and Treatment
- Asthma Prototypes: The Variability of Triggers for Bronchospasm
- Spots, Dyspnea, Exercise and Oxygen: Pulmonary Issues for the Primary Care Physician
- Update from Assisted Reproductive Technologies: Short and Long Term Outcomes

Friday Afternoon, October 27

All afternoon courses run concurrently from 1:30 p.m. to 5:00 p.m.

- Allergic and Inflammatory Emergencies
- Endovascular Versus Open Operative Procedures
- Current Treatment Options for Old Familiar Problems
- Save Lives Save Dollars
- Surviving to Adulthood with a Pediatric Illness
- Preparing for a Regional Health Information Organization



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ONE TO PONDER

Kent County Medical Society

Chip McClimans



Another Season

The last time we met in this column, I mentioned I would discuss the functions of the Kent County Medical Society in this issue. We'll have to postpone that to the November/December issue.

As you read this, we will be back into the heart of another cycle of the election season. The primaries were held in early August and we now know who the candidates are running for Governor, the Michigan House of Representatives, the Michigan Senate, the Michigan Supreme Court, the U.S. House and the U.S. Senate. And every year during the election season, you are barraged to get involved some how, some way.

Why?

To put it simply, the future of your profession depends on it.

Why?

Because if you choose not to get involved, others will and all the hard fought battles won for your patients and your profession could change 180 degrees.

Why?

If you haven't figured it out yet, others want to control you and erode the practice of medicine.

Not convinced?

How many more bills about scope of practice issues need to be introduced to further the intrusion on medicine by para-health professionals? How about who decides how much you get paid by Medicare and Medicaid, especially Medicare? This one really gnaws at me. Do you know the hospital association put the screws to the physicians on Medicare payments? A couple years

ago when we (medicine) were fighting for an increase in Medicare reimbursement, the hospitals got Congress to give them automatic payment increases for their Medicare reimbursement, and they (hospitals) didn't help the physicians one bit to get your reimbursement schedule fixed. Yeah, who's your daddy now?

It's a well known fact many physicians don't like the game of politics. Too bad. You got to play, and you got to pay to play (my apologies to my English teachers for the bad grammar). It's as simply as that.

Yeah, who's your daddy now?

So here's what you do. First, make a contribution to MDPac (go to www.msms.org) for information to contribute. They have one of the highest percentages of political action committees in the state supporting the winners. Second, financially support our local candidates. Third, vote. Fourth, be sure your spouse, family members, staff, neighbors, friends and patients vote.

Whether you want to believe it or not, the outcome of any election can be decided by those voting who are sympathetic to medicine.


The choice is yours.

Make a difference this election season and get into the game.

MED
MAL

TIP #9

Know their approach to protecting physicians.



There is a big difference in operating philosophy among medical malpractice carriers. With some, defense against claims may be half-hearted at best. Many good physicians have been hurt by frivolous lawsuits when their good work went undefended in favor of quick-fix settlements. Clearly, this does not serve you or the profession well.

Get proper care.

ProAssurance Group has led in defense of physicians for over a quarter of a century. Our strong record of personalized service and number of cases tried to verdict are testaments to our long-term commitment: to help good physicians keep practicing good medicine.

What level of attention do *you* want if defense is needed?



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E V E R V I G I L A N T

KENT COUNTY HEALTH DEPARTMENT

Mark Hall, MD, MPH

Don't Take a Vacation from Planning for Pandemic Influenza

It is likely that most of us spent part of our summer planning for a vacation. Maybe you spent a week camping in the woods, sunning on the beach or swinging on the links. No matter what the activity was, your planning likely revolved around a known destination, a set timeline, and a relative confidence in the local weather forecast. Imagine, if you will, trying to plan for a vacation where you do not know how long you'll be gone, whether or not you'll have an electrical hookup, flush toilets, or access to a grocery store, and don't know if you're heading to the tropics or the arctic. Planning for a pandemic is similar to preparing for such a vacation. The uncertainty surrounding the timing, duration and magnitude of a pandemic presents unique challenges to planning. As health care professionals, we are not only responsible for preparing ourselves and our families, but also for preparing our offices and clinics for our patients who rely on us for their well-being. This article offers some guidance on how to pack your pandemic suitcase.

Preparing at Home

In addition to yourself, it is also important to encourage your staff members to prepare their homes for a possible pandemic. A pandemic may cause disruptions in daily life, including limited supplies of food and water and disruption of utilities such as electricity, gas, and communications. In preparation, consider the following:

- **Store a two-week supply of food (non-perishable and ready to eat) and water (1 gallon of water per person per day), considering any special dietary needs of your family (infants, allergies, diabetics, etc.)**
- **Have a supply of prescription and non-prescription drugs and other health supplies**
- **Have an adequate supply of household items (toilet paper, batteries, flashlights, garbage bags, manual can openers, etc.)**
- **Consider having alternate fuel supplies and cooking mechanisms (propane, grills, camp stoves)**
- **Plan for the possibility that usual services may be disrupted (hospitals, banks, stores, restaurants, government offices, and post offices)**
- **Talk with family members and loved ones outside your household about how they'd be cared for if they got sick**
- **In the event that schools are closed, plan home learning activities and exercises. Also plan recreational activities that your children can do at home.**
- **Teach children appropriate hand hygiene and cough etiquette** Additional information can be found at <http://www.pandemicflu.gov/plan/tab3.html>

Preparing the Office or Clinic

During a pandemic, the need for health care will be great. To ensure the smooth operation of your office/clinic in the face of a pandemic while protecting the health of your staff and patients, your planning should include the following considerations:

- **Formulate a priority list for office staff to receive vaccine and/or anti-virals if supplies are limited**
- **Prepare for a reduced workforce (up to 40% of staff could be absent)**
- **Identify critical services to maintain operation**
- **Cross-train employees to handle critical services**
- **Entertain the possibility of alternate hours and staggered work schedules**
- **Encourage staff to develop family care plans for their dependents so they may be available to offer critical health care services**
- **Establish policies (compensation and leave) for staff who have been exposed, are suspected ill, become ill at work, or return to work after being ill**
- **Establish a plan for triage and management of patients (including masking and separation of patients in the office)**
- **Create appropriate signage containing instructions on triage, cough etiquette, and hand hygiene for patients**
- **Anticipate need for resources and stockpile at least a week of consumable resources (masks, gloves, hand hygiene products, tissues, and other medical supplies)**
- **Call the Kent County Health Department at 616-632-7228 for assistance in developing surveillance and education plans for your office/clinic.** Additional information can be found at <http://www.pandemicflu.gov/plan/tab6.html>

Stay Informed

In addition to preparedness at the individual and office/clinic levels, establishing avenues of communication with the health department today is imperative to smooth collaboration and response if faced with a pandemic event. KCHD has developed e-mail, fax, and pager systems to alert health care providers to changes in global influenza activity and other public health emergencies. KCHD provides local influenza data weekly via its web site www.accesskent.com/health and also circulates an electronic report on weekly influenza activity. KCHD has also set up a community hotline through Heart of West Michigan United Way's 2-1-1 to provide up to date information on pandemic activity, symptoms, prevention, and community enforcements to curb the spread of infection.

Maintaining current contact information for your office/clinic is integral to effective communication before, during and after a pandemic. Please contact **KCHD at 616-632-7228** to update your information and request to be added to the distribution list for weekly surveillance reports.

It is my hope that you have already begun your planning activities for pandemic influenza. If not, it is highly recommended that you start now. Although I tend to pack the night before a trip, planning for a pandemic is not something we should procrastinate. It is one thing to be stuck wearing the same pair of underwear for a whole week, and quite another to be caught in the middle of a pandemic with an empty suitcase.



Notifiable Disease Report

Kent County Health Department
700 Fuller N.E.
Grand Rapids, Michigan 49503
www.accesskent.com/health

Communicable Disease Section
Phone (616) 632-7228
Fax (616) 632-7085

July, 2006

Notifiable diseases reported for Kent County residents through end of month listed above.

DISEASE	NUMBER REPORTED		MEDIAN CUMULATIVE
	This Month	Cumulative 2006	Through Jul 2001-2005
AIDS ^a (Cumulative Total - 710)	N/A	26	24
AMEBIASIS	0	3	1
CAMPYLOBACTER	8	35	28
CHICKEN POX ^b	12	232	91
CHLAMYDIA	262	1892	1525
CRYPTOSPORIDIOSIS	0	7	4
E. COLI O157:H7	0	5	N/A
GIARDIASIS	7	31	46
GONORRHEA	145	718	583
H. INFLUENZAE DISEASE, INV	0	1	N/A
HEPATITIS A	0	3	7
HEPATITIS B (Acute)	0	1	4
HEPATITIS C (Acute)	0	0	0
HEPATITIS C (Chronic/Unknown)	17	106	230
INFLUENZA-LIKE ILLNESS ^c	14	31356	13761
LEGIONELLOSIS	0	6	N/A
LYME DISEASE	0	4	N/A
MENINGITIS, ASEPTIC	2	15	7
MENINGITIS, BACTERIAL, OTHER ^d	1	2	11
MENINGOCOCCAL DISEASE, INV	0	1	N/A
MUMPS	0	1	0
PERTUSSIS	0	6	4
SALMONELLOSIS	6	23	23
SHIGELLOSIS	1	3	4
STREP, GRP A, INV	1	12	8
STREP PNEUMO, INV	1	30	23
SYPHILIS (Primary & Secondary)	0	8	2
TUBERCULOSIS	1	10	12
WEST NILE VIRUS	0	0	N/A

NOTIFIABLE DISEASES OF LOW FREQUENCY

DISEASE	NUMBER REPORTED	DISEASE	NUMBER REPORTED
	Cumulative 2006		Cumulative 2006
Histoplasmosis	7	Encephalitis, Post Other	1
Hepatitis B, perinatal	1	Listeriosis	1
Coccidioidomycosis	3	Cryptococcosis	2

a. Due to a national effort to de-duplicate the HIV/AIDS Reporting System, there was a change in the numbers reported as of 7/1/06.

b. Individual chickenpox case reporting became mandatory on Sept. 1, 2005, which may result in an increase in numbers.

c. Influenza-like illness numbers increased in 2005 due to a change in school reporting of communicable diseases.

d. "Meningitis, Bacterial, Other" includes cases caused by bacteria OTHER THAN *H. influenzae*, *N. meningitidis*, or *S. pneumoniae*.

N/A Data not available.

ALLIANCE MESSAGE

Kent County Medical Society

Dolores Dobbie, KCMSA President

Heartbeat

As summer comes to a close, the Alliance is preparing for an exciting year ahead. Meetings and events have been planned, as well as many opportunities to volunteer your time by doing “hands-on” work, whether it is working with schools to diminish school bullying, instilling internet safety for our youth, collecting meds/equipment for International Aid, participating in the Holiday party for a daycare center or by adding your voice in legislative advocacy. Additionally, there are many worthwhile charities in our community that we have selected to support.

Our members play an important role in the success of our organization. We are always interested in meeting new physicians’ spouses as they settle into our medical community, often from other areas outside of Michigan, and welcoming them into the Alliance. We are all encouraged to take that extra step, make that telephone call and invite someone new to learn all about our organization, especially now with many new physicians in town beginning their practices. Dee Loge –Wacker, MSMSA President has offered this challenge to the Alliance: “EACH ONE REACH ONE” . If we each brought one new member we could double our membership and do even more for Kent County. In fact, the following list of events offers you the opportunity to bring someone new!!!

Please take a moment and look over some of the events that have been planned. Jot them on your calendar, SAVE THE DATE and please plan to attend.



An EVENING at the SPA.....

Thursday, Sept. 21 6:30pm -9:30pm
VASAIO SPA \$30.00
Includes 10-minute services/wine/
hors-d’oeuvres

*Proceeds to benefit KCMSA Foundation charities
Checks payable to KCMSA; mail to:
Francesca Wiseman 615 Cambridge Blvd. SE 49506*



SHOPPING TRIP to Chicago

Friday, Nov. 3.
It’s one LONG day of fun, laughs and shopping, of course. More info to come.

HOLIDAY TEA

Tuesday, Dec. 5.

HOPE Community Day Care

PARTY Wednesday, Dec. 6.



Lunch at Gilda’s Club

Tuesday, Oct. 10-12 noon

Lunch and tour of this Incredible facility and grounds. More info to come.



CHARITY BALL FOR CHILDREN is being planned for February 5 at Egypt Valley Country Club. Dee Federico, Chair, welcomes all interested in helping on the committee. It is a GREAT group to work with and a lot of FUN!!! More info to come regarding the ball.

This is just a SMALL part of what we have planned and all that we do.

Ora Jones, President-elect and membership chair is currently planning ways to welcome potential new members and newly-joined members.

If you happen to be reading this for the first time and are interested to learn more about what the ALLIANCE does at the local level, the state level and the National level, I encourage you to contact me, Dolores @ 616-531-2563, or dedinred@comcast.net. I am looking forward to answering any questions.

Let’s work hard and have fun together this Alliance year!

Respectfully submitted,

Dolores Dobbie
President

Special Interest Groups will be starting up again this fall.

Monthly Book Club – discussion held at Schuler’s Books on 28th Bridge Club

Scrapbook Club – held at Pictures in Time on Plainfield

Stitchery Club

Gourmet Club – at members’ homes.

Once dates have been set, information will be sent out via e-mail/next Bulletin/Heartbeat

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Project Access coordinates with volunteer Physicians and Hospital's for \$1M in Charity Care

We have great news to report to the KCMS and KCOA Members who have helped to make Project Access a thriving safety net for uninsured patients in Kent County.

One Million Dollars in Care Since April 2005, Project Access has been serving as the conduit to care for many uninsured, low-income people in Kent County. As a physician-administered organization, the program is focused to help physicians continue to see uninsured patients, but in an easier, more efficient manner. We are proud to report that YOUR program has reached a million dollars in documented, donated care to qualified patients.

Saving ER usage Over 550 individuals have been served by volunteer physicians in Kent County. By referring your existing (low-income) patients to Project Access, or accepting new uninsured patients, a physician may ascertain that the patient will receive specialty care, coordination of no-cost or low-cost medications through drug manufacturers' programs, and hospital care or services if needed, as donated by the hospitals' charity care programs. These individuals would have eventually utilized the Emergency Department at our local hospitals, and in most cases, would have waited until their condition was severe.

New Location Due to the tremendous growth of our operations, we have relocated the Project Access team to a new location. They are now located at the Masonic Center at 233 East Fulton Street, Suite 108, Grand Rapids, MI 49503. Contact numbers are: Phone: 459-1111 and Fax: 459-1133. The program remains part of Kent County Medical Society and Kent County Osteopathic Association, however due to space limitations, needed to find a satellite home.

Grant Support and other contributions Project Access is a 501 (c) (3) charitable, non-profit organization. This tax-exempt designation allows Project Access to seek and receive charitable contributions.

As predicted, the Board anticipated the success of Project Access as the winning equation of 1) physician endorsed, plus 2) physician administered, plus 3) patient accountability equals success in seeing uninsured patients. Because of these commitments, the community has begun to endorse Project Access and see it as a viable community resource eligible for community support. We are thrilled to announce a very generous grant through the Blue Cross and Blue Shield Foundation for Free Clinics allowing the Project Access team to screen and mentor patients, allowing physicians to see uninsured patients

more efficiently. In addition, an extension of funds through the Healthier Community Access Programs, a federal grant in coordination with Cherry Street Health Services and Kent Health Plan, has just been granted. Project Access continues to receive funds through private contributors as well.

Project Access has also been given a tremendous opportunity to receive donated dollars through a matching grant. The donors have agreed to match gifts totaling \$25,000 if Project Access raises \$25,000. More information will be distributed regarding this time-limited offer (by December 1, 2006). The Board is excited to participate in this and the offer proves that the community supports our unique, physician volunteer program.

In-kind support from corporate and individual donors helped to make a move to a satellite location possible for Project Access. The Board and staff are very grateful for their generosity in gifts of time, talent and resources.

Thank You for making our Project Access office possible

Technology equipment and consulting services – Ron Falk
Copy machine and office supplies – PPOM Midwest
Network Wiring – Anonymous donor
Telecommunications software – ITS Communications
Telecommunications installation and consulting –
Preferred Telecom Solutions
Voice mail equipment/software – Pella Windows
Office furniture for five staff members – Anonymous corporate donor

Wish List Suggestions The Project Access staff has been asked to create a wish list of items that may be needed to assist in operations. There is always a need for office supplies and copier paper. If you know of a community agency or group of volunteers wishing to support a non-profit organization, please inform them that Project Access is in need of office supply gift cards. Thank you!

Finally in 2006 alone, we have over \$650,000 in documented, donated care to uninsured residents. We could not have reached that without the assistance of our volunteer physicians and hospital charity care programs. Thank you for assisting this population in regaining their health and moving forward in their lives.

MICHIGAN STATE MEDICAL SOCIETY

House of Delegates Election Results

April 28 - 30, 2006

Paul O. Farr, MD, Grand Rapids, was installed as President of the Michigan State Medical Society.

ELECTION RESULTS

Elected President-Elect	AppaRao Mukkamala, MD, Flint
Re-Elected Speaker	Daniel B. Michael, MD, Detroit
Re-Elected Vice-Speaker	Rose M. Ramirez, MD, Grand Rapids
Elected Secretary	Donald B. Muenk, MD, Warren
Elected Treasurer	Mitchell A. Rinek, MD, Lansing
Re-Elected MSMS 5th District Director and Elected Vice Chair	Gregory J. Forzley, MD, Grand Rapids
Elected MSMS 5th District Director	David M. Krhovsky, MD, Grand Rapids
Re-Elected AMA Delegate	Domenic R. Federico, MD, Grand Rapids



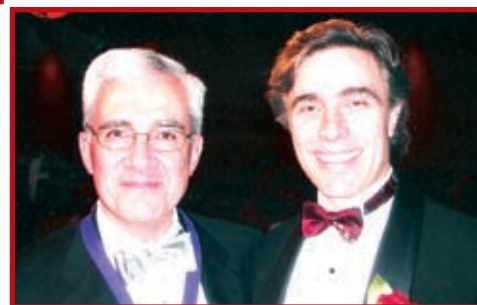
DOCTORS IN THE NEWS

At the Michigan Academy of Family Physicians Annual Congress of Delegates meeting in July of 2006, KCMS members were elected to the following positions:

James Applegate, MD was elected as an Alternate Delegate to the American Academy of Family Physicians for the Michigan Academy of Family Physicians.

Robert Reneker, Jr., MD was elected President-Elect of the Michigan Academy of Family Physicians.

Timothy Tobolic, MD was elected as a Delegate to the American Academy of Family Physicians for the Michigan Academy of Family Physicians.



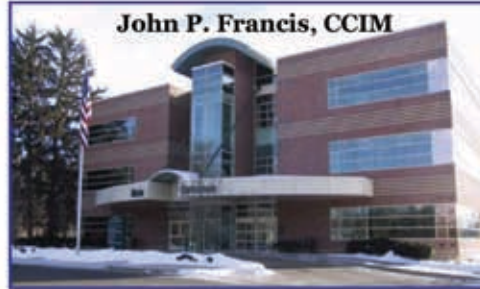
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Denise J. Chumas**



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Denise J. Chumas



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- ◆ Great for a medical practice

Mark A. Baker, CCIM



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NEW MEMBERS

Kent County Medical Society

Brian Averell, DO (Active)
Neurology

B.S.: Rutgers University, B.S., 1995

Medical School: Philadelphia College of Osteopathic Medicine, 2000

Internship: Philadelphia College, 2000 – 2001

Residency: University of Cincinnati, Neurology, 2002-2005;
Internal Medicine, 2001-2002

Fellowship: Cleveland Clinic Foundation,
EMG/Neuromuscular, 2005 – 2006

Address: 3322 Beltline Ct. NE, Grand Rapids, MI 49525 456-9104

Sponsors: Timothy Thoits, MD and Herman Sullivan, MD

Erik C. Hedlund, DO (Active)
Orthopaedics

B.S.: Bethel College, St. Paul, MN, 1992

Medical School: Chicago College of Osteopathic Medicine, 1998

Internship/Residency: Mt. Clemens General Hospital,
Orthopaedic Surgery; Michigan State
University College of Osteopathic Medicine,
rotating internship and Orthopaedic Surgery
Residency, 1998 - 2003

Fellowship: MSU Department of Orthopaedics, Orthopaedic Sports
Medicine, 2003-2004

Address: 4069 Lake Drive SE #315, Grand Rapids, MI, 49546,
464-2860

Sponsors: Anthony Foster, MD and Jeffrey Gawel, MD

John H. Huntington, MD (Active)
Anesthesiology (Board Certified)

B.S.: University of Michigan, Ann Arbor, MI, B.S., 1986

Medical School: University of Michigan, Ann Arbor, MI, 1990

Internship: Butterworth Hospital, Grand Rapids, MI, 1990 -1991

Residency: University of Michigan, Ann Arbor, MI,
Anesthesiology, 1991 – 1994

Fellowship: University of Michigan,
Pediatric Anesthesiology, 1994 – 1995

Previous Practices: University of Michigan,
Mott Hospital, Ann Arbor, MI 1995 – 2000;
Advocate Christ Hospital, Oak Lawn, IL, 2000 – 2005

Office: 3333 Evergreen Dr. NE, Grand Rapids, MI 49525, 364-4200

Sponsors: David Hejna, MD and Brett Doud, MD

Marc McClelland, MD (Active)
Internal Medicine (Board Certified)
Critical Care

B.S.: University of Michigan, Ann Arbor, MI, 1992

Medical School: University of Chicago,
Pritzker School of Medicine, 2000

Internship: Stanford University Hospitals,
Internal Medicine, 2000-2001

Residency: Stanford University Hospitals,
Internal Medicine, 2001-2003

Fellowship: University of Michigan, Ann Arbor, MI,
Pulmonary & Critical Care, 2003-2006

Address: 4100 Lake Drive SE #200, Grand Rapids, MI, 49546,
974-4750

Sponsors: Steven Fitch, MD, Timothy Daum, MD
and Michael J. Harrison, MD

Randall Meisner, MD (Active)
Internal Medicine (Board Certified)
Gastroenterology

B.S.: University of Michigan, Psychology, 1996

Medical School: University of Michigan, 2000

Internship/Residency: Northwestern University, McGraw School,
Internal Medicine, Chicago, 2000-2003

Fellowship: University of Wisconsin – Madison,
Gastroenterology, 2003-2006

Office: 4100 Lake Drive SE #205, Grand Rapids, MI 49546,
774-2414

Sponsors: James Fuson, MD and Michael Puff, MD

Peter A. Ugolini, MD (Active)
Orthopedic Surgeon

B.S.: Albion College, Albion, MI, 1995

Medical School: Wayne State University, Detroit, MI, 2000

Internship/Residency: Thomas Jefferson University Hospital,
Philadelphia, PA, Orthopedics, 2000-2006

Office: 1300 Michigan St. NE, #200, Grand Rapids, MI, 774-9515

Sponsors: Richard A. Bereza, MD and Randy F.R. Lovell, III, MD

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THE DOCTOR'S WELL BEING COACH

5 Keys to turning *STRESS* into *SUCCESS*

Manya Arond-Thomas, MD

Stress is a primary occupational hazard for doctors. Yet many docs are in a state of denial about their level of stress. They often shrug it off without fully realizing how it's impacting their own well-being or those with whom they interact professionally and personally. Why is this so?

Medical training reinforces and exacerbates the pre-existing trait of perfectionism that many docs have. While the practice of medicine both requires and values excellence (the positive motivator of perfectionism), when taken to extremes, perfectionism can cause people to feel that nothing they ever do is good enough to justify a feeling of self-satisfaction. Perfectionism can create or perpetuate low self-esteem, as well as a sense of chronic disappointment in others.

Furthermore, medical training is designed to strengthen doctors ability to operate under duress, and they became acclimated to high stress levels. Even after training when they have the ability to exercise more control, they're so conditioned to tolerate stress that they may not recognize when things are getting out of balance and they need to take corrective action.

Lastly, because of the rigorous and focused training demands during their 20's and 30's, many docs never get the kind of life/work experience that many of their cohorts get through engaging in the social contact and exploration of living and working in multiple and varying contexts. Thus, many docs don't learn some of the adaptability and change management skills their cohorts necessarily learn that confer greater stress resilience.

The cumulative stress of practicing medicine tends not to culminate until doctors are in their mid-40's at their entrepreneurial peak. It's at this time that they have reached a high enough level in their practice that they have more business responsibilities (for which they usually are not trained). They're far enough out of training that they must invest significant time and energy to stay up to date clinically. Add to that the reality that for many their families are reaching a crescendo, they've got more financial and emotional demands at home, and their lifestyle costs are rocketing up.

All these factors converge to produce chronic high stress that can produce symptoms ranging from loss of confidence and professional equanimity to more severe fatigue, irritability and anger, burn-out, risk of depression and suicide, and slipping backwards in the business. Stress mediation for docs is crucial and needs to match and offset the level of stress. While each person will have stress reduction strategies that work particularly well for them, there are five keys to reducing stress and achieving enduring optimal well-being.

SUCCESS

1. Manage Perfectionism

Learn to say no when requests are unrealistic or emotionally exhausting. Set realistic goals for yourself and others. Accept mistakes and failures as the path to success. Let go of the need to control everything and do it yourself. Recognize that a successful life and high self-worth are based in more than productivity and accomplishments

2. Empower Yourself

Knowing you have the freedom to choose how to act in difficult situations is a trait of stress resilience. Our experience of stress is a function of how we respond to events, not the events themselves.

a. Self-empowerment drives self-esteem. Every choice you make reflects the quality and degree of your self-esteem. This includes how well you take care of yourself, the food you eat, the level of fitness you maintain, the quality of your relationships, saying what needs to be said, and giving yourself options when things aren't going well.

b. Reclaim your sense of purpose and passion. Stop, take a step back, and assess your level of fulfillment. Does it reflect the passion and purpose that guided you into medicine in the first place? If not, it's time to evaluate what you need to reconnect to these elements that sustain you spiritually in your work.

3. Develop stress-management skills

Most of us did not routinely learn skills in high-performance communication, conflict management, and time & priority management. However, they are learnable. It's common knowledge that prolonged stress leads to physical illness. In either case, the toxins in life are outbalancing the nutrients required for health and wellbeing. Learn to say no to reduce external demands and give your self multiple, real vacations, both short and long, as a way to rejuvenate.

4. Focus on what you want, not what you don't have

Quantum physics tells us that everything is energy, including thought. Everything begins with thought, and what you focus on expands focus only on work and that will expand. Focus on the things that are irritating you and your irritation will expand. Instead, learn to view your negative emotions as information about what you don't want, and once you have that information, shift your focus to what you do want for yourself.

5. Make decisions and take action

Success in any aspect of life is a function of 3 skills self-mastery, tools, and the ability to take action. There's truth to the saying if you always do what you've always done, you'll get what you've always got. The most important stress reduction action IS to take action. Once you recognize you're out of balance, clarify what you need and then take practical, positive engineered steps to achieve the well-being you desire! If necessary, get expert help to solve the problem. You deserve the same kind of attention your patients do, don't you?



Manya Arond-Thomas, M.D., is a physician and a life/career coach to doctors

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Bruce Springer, M.D., received his medical degree at Wayne State University School of Medicine. He completed a residency in Internal Medicine at Blodgett Memorial Medical Center and Saint Mary's Health Care.

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He completed his orthopedic surgery residency at the University of North Carolina and recently completed a fellowship in hand and microsurgery.

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IN MEMORIAM

Austin E. Lamberts, MD

1914-2006

Austin E. Lamberts, MD, a retired member of the Kent County Medical Society passed away April 18, 2006. Doctor Lamberts received his medical degree from the University of Michigan in 1941. He practiced as a neurosurgeon in Grand Rapids after World War II until an injury rendered his right hand paralyzed. He then left medicine and entered the field of Marine Zoology. He was also a medical missionary working in many countries.

The Medical Society extends sympathy to his family.

James W. Logie, MD

1911-2006

James W. Logie, MD, a former president and retired member of the Kent County Medical Society passed away June 22, 2006 in Grand Rapids. Doctor Logie received his medical degree from the University of Michigan in 1935. He practiced as a general surgeon in Grand Rapids from 1942 until his retirement 1986.

The Medical Society extends sympathy to his family.

Dugald S. MacIntyre, MD

1911-2006

Dugald S. MacIntyre, MD, a retired member of the Kent County Medical Society passed away February 24, 2006 in Tennessee. Doctor MacIntyre received his medical degree from the University of Michigan in 1936. He practiced as a general surgeon in Grand Rapids from 1948 to 1986.

The Medical Society extends sympathy to his family.

John B. Wilkes, MD

1915-2006

John B. Wilkes, MD, a retired member of the Kent County Medical Society passed away May 7, 2006. Doctor Wilkes received his medical degree from the Vanderbilt University Medical School in 1939. He practiced as a general surgeon in Grand Rapids for 30 years before retiring in 1987.

The Medical Society extends sympathy to his family.

CLASSIFIEDS

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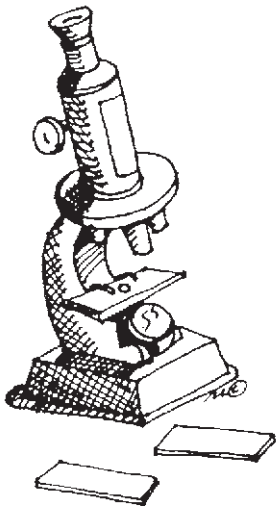
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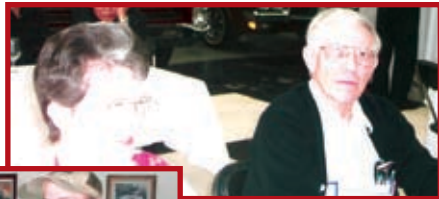
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