



Bulletin

THE OFFICIAL JOURNAL OF THE KENT COUNTY MEDICAL SOCIETY & THE KENT COUNTY OSTEOPATHIC ASSOCIATION

WINTER 2016

Charity Event

A Dose of Generosity attendees were treated to a fantastic evening that benefited two local charities.

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KCHD Report: Zika Virus

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Maintenance of Certification

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KCMS Annual Meeting

MORE INSIGHT

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KCOA

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A Dose of Generosity Charity Event
featured a silent auction with a twist.
Proceeds funded two charity grants.

CONTRIBUTORS

20	Kent Medical Foundation
22	Alliance Heartbeat
28	MSU - College of Human Medicine
29	Kent County Health Department

GET INVOLVED:

Learn more about the Kent County Medical Society at www.kcms.org.

Learn more about the Kent County Osteopathic Association at www.kcoa.us.

In Memoriam

GORDON L. BARTEK, MD

Dr. Gordon Bartek passed away on November 26, 2015. He earned his Bachelor of Science and Doctor of Medicine degrees through an accelerated program at the University of Nebraska. Dr. Bartek completed his internship at Bishop Clarkson Hospital in Omaha, before being deployed as lieutenant with the US Navy, where he served as ship's surgeon. After his time in service, he completed his residency in radiology at Henry Ford Hospital in Detroit. During his medical career, Dr. Bartek served as staff radiologist at Ferguson Hospital in Grand Rapids and Holland City Hospital. Dr. Bartek joined the staff of Spectrum Health in 1997, where he served until his retirement.

RICHARD K. CRISSMAN, MD

Dr. Richard "Dick" Crissman passed away on December 1, 2015. He attended Williams College on the US Navy's V-12 program and medical school at Marquette University, subsequently serving in veterans' hospitals at the end of WWII and during the Korean War. Dr. Crissman became a general surgeon and served on the staff of St. Mary's Hospital in Grand Rapids for almost 50 years, continuing his general practice after that, and finally as a physician for the county jail well into his eighties. He had a private practice from the time the family moved to Caledonia in 1952 until his retirement in 2005.

ALLAN C. HOEKZEMA, MD

Dr. Allan Hoekzema passed away on January 2, 2016. The son of a surgeon attended Calvin College and earned his medical degree from Northwestern University Medical

School in Chicago. Following a residency in orthopedic surgery at Northwestern, Dr. Hoekzema spent two years with the US Navy in Puerto Rico. In 1973 he moved to Grand Rapids and established an orthopedic practice specializing in hip and knee replacement surgery. Among Dr. Hoekzema's passions in life were his many patients, whom he was honored to serve.

ROBERT A. VANDERPLOEG, MD

Dr. Robert VanderPloeg passed away on January 25, 2016. After high school he joined the US Army and served as a chaplain's assistant and supply sergeant in Europe from 1945 to 1947. Dr. VanderPloeg attended Central College in Pella, Iowa and earned his medical degree from University of Iowa Medical School. An internship brought Dr. VanderPloeg and his family to Saginaw, Michigan and then to Grand Rapids for a four-year surgical residency at St. Mary's Hospital. He remained in surgical practice in the area until his retirement in 1991.

ROGER N. WASSINK, MD

Dr. Roger Wassink passed away on January 9, 2016. He was a graduate of Grand Rapids Christian High School and attended Calvin College. Dr. Wassink received his medical degree from Northwestern University Medical School in Chicago and completed an internship and general surgery residency at Butterworth Hospital in Grand Rapids. He served as a lieutenant in the US Navy for 2 years, practicing at San Diego Naval Hospital and also aboard ship as a physician. Dr. Wassink practiced as an orthopedic surgeon at Butterworth Hospital from 1964 to 1992.

GRCC Giants Award honors Dr. Herman C. Sullivan

Herman C. Sullivan, MD, President-Elect of the KCMS Board and the President of the Board of the Grand Rapids African American Health Institute was honored at the 2016 GRCC Giants Award Ceremony.



Herman C. Sullivan, MD

Since 1983, thirteen African American individuals and/or organizations are recognized annually for their exceptional contributions shaping the history and quality of life of greater Grand Rapids. The idea for this event grew out of need for recognizing notable contributions of African Americans to the quality of life in Grand Rapids. The

founders for this event, Dr. Patricia Pulliam and Cedric Ward decided to engage a group of people from the community to plan the event.

The awards recognize the contributions from all aspects of community life. Each award is named after local individuals who have given excellence and is a perpetual memorial to their notable contributions.

Proceeds from the event are contributed to the Grand Rapids Community College Foundation's Milo M. Brown Memorial Scholarship Fund. Two or more scholarships are awarded annually. The scholarships are presented to African American students as perpetual memorials to Mr. Brown.

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Join Us

KCMS MEETINGS OF INTEREST

MARCH 4, 2016

HEALTH FORUM OF WEST MICHIGAN

Topic: The Evolution of Healthcare

To register or for more information, please visit: www.gvsu.edu/miperc.

MARCH 14, 2016

DEVOS MEDICAL ETHICS COLLOQUY

Topic: Is America Going to Pot?

To register or for more information, please visit: www.gvsu.edu/colloquy.

FEBRUARY 8, 2016

LEGISLATIVE COMMITTEE LUNCHEON

Masonic Center, 4th Floor | Noon

APRIL 4, 2016

LEGISLATIVE COMMITTEE LUNCHEON

Masonic Center, 4th Floor | Noon

APRIL 30–MAY 1, 2016

HOUSE OF DELEGATES

The Henry, Dearborn



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Paging All Retired Members!

Join Us for a Social Breakfast Gathering for "The IV Leaguers"



No agenda. No tasks. Just an opportunity for the KCMS and KCOA to host retired members. A great chance to connect with returning snow birds and catch up!

WEDNESDAY, APRIL 27 | 7:30-9AM

The Omelette Shoppe

Breton Village Shopping Center

1880 Breton Rd SE, Grand Rapids, MI 49506

RSVP: Mariana at 458-4157

or kcmsoffice@kcms.org.



David E. Hammond, MD
2015 KCMS President,
Board of Directors

PRESIDENT'S MESSAGE

The Doctor-Patient Relationship: Can It Survive The Assault?

So often today we as physicians hear about, read about and think about physician burnout and disillusionment with the practice of medicine and the direction our roles are changing within the delivery of healthcare. Many physicians still feel fulfilled by family, friends, physician colleagues and achievements in their professional lives.

However, at the same time there is an undercurrent of disappointment and demoralization with what medical practice has become. Our disappointment professionally relates directly to the incessant interference with our work, a deep erosion of autonomy and authority and the transformation of a physician to a "provider". Many doctors are feeling more like robots.

In a recent national survey of physicians to better understand their depth of dissatisfaction, 84% of physicians believe that quality patient time maybe a thing of the past. 78% of doctors surveyed frequently feel rushed when seeing patients and their relationships with patients has been eroded. 87% feel the business and regulation of healthcare has changed the practice of medicine for the worst. The question is certainly raised therefore; Are we as physicians losing control of our patients and our profession?

Physicians are experiencing a multitude of regulations, mandated duties and liabilities that are escalating yearly. These increasing regulations

include RVU's, patient volume and quotas, diminished reimbursements, mega healthcare mergers and electronic medical records. These various administrative and regulatory demands imposed upon physicians are leading to the rapid demise of private practice as we know it. In a recent report by Accenture, the percentage of physicians in independent practice fell from 57% in 2000 to 38% in 2014.

Therefore, the patient-physician relationship is under siege because of the severe strains related to these rapid changes in medical practices. What really suffers is the breakdown of the doctor-patient relationship when the system becomes the most economical and efficient method of healthcare delivery to large masses of people. In this new era of cost controls and managed care, the incentive to do more for patients has shifted dramatically to an incentive to do less. The less usually includes less time spent with patients which is a fundamental threat to establishing a good doctor-patient relationship. This "sacrosanct"

union of physician and patient is the primary reason we as physicians went into the profession of medicine. Some of our frustration lies in the fact that we sacrifice and commit ourselves as physicians to a life that transcends our own to put patient's interest ahead. This commitment to others is the very essence of what constitutes the doctor-patient relationship. It is the very center of what makes us doctors.

This joy of interaction with our patients is often greatly interfered with by the record keeping and quality data collection that has mushroomed with EMR mandates. One of the biggest obstacles is the fact that doctors are being asked to do more and more menial and clerical work which takes away from time spent with our patients. Although many physicians believe in technology to help them in patient care, they do not want technology to detract from practicing medicine in a way totally supportive of our patients.

Our mission as physicians is to diagnose and treat diseases, prevent diseases and to promote and improve the health, well-being and quality of life for our patients. We are willing to do this by developing meaningful relationships directly with our patients. When this relationship is interfered with, there then becomes a generation of physicians who are either not permitted or do not feel compelled to take ownership of their patient's care.

It is my hope that collectively we as physicians are willing to own our destiny related to this doctor-patient relationship. This will result in a positive effect on the practices of all physicians in the Kent County Medical Society. We must be willing to stand up for our patient's best interests as related to their healthcare. Therefore, I ask our membership of KCMS for your continued support and cooperation in providing the leadership to insure that our guiding principles as a medical society will provide quality medical care for all our citizens.

It has been an honor and privilege for me to represent KCMS as your President for 2015. I have had the pleasure to work with our exceptional Board of Directors along with Patty Dalton, our Executive Director, and her amazing administrative staff. Thank you all as members for your support. I sincerely hope that your membership in KCMS will continue to be a meaningful one.



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January CME Event

Thank you for taking time from your weekend to attend the Kent County Medical Society January CME Event. We hope you found the program to be informative and time well spent. A special thanks to our speakers: Drs. William Sanders, Cara Poland, and Mohammad Poostizadeh. Thank you for gifting your time and knowledge to provide critical information at the KCMS CME Event.



*left: William Sanders, DO
below: Flor Borrero, MD*



left: William Sandy Oettmann, MD and Gerald Lee, MD





top left: Cara Poland, MD, M.Ed


top right: Mohammad Poostizadeh, MD

below clockwise from top left: Amanda Huver, DO,
Judy Meyer, MD, James Hudson, MD, Larry Rob-
son, MD, Kevin Fitzgerald, MD, Michael Crawford



Super Doctor



Happy Doctors' Day

WEDNESDAY, MARCH 30

All Doctors are Heroes



Annual Meeting

Thank you to all that attended the Kent County Medical Society 113th Annual Meeting where Dr. David E. Hammond administered the oath of office and installed Dr. Jayne E. Courts as the 113th President of the Kent County Medical Society. The KCMS gavel was turned over to Dr. Courts.



left to right: Rose Ramirez, MD, David E. Hammond, MD, Jayne E. Courts, MD

AMA Adopts Resolutions from Kent Delegation Members

Congratulations to Dr. Michelle Condon and Dr. Jayne Courts for being the authors of three resolutions recently adopted by the AMA. Our local delegation to the Michigan State Medical Society House of Delegates has a reputation for its work on resolutions. In fact, most years, Kent County is one of the counties that submits the most resolutions for consideration. This past

November, when the AMA House of Delegates met, three resolutions from the MSMS House of Delegates were adopted including the following:

1. A policy supporting a ban on microbeads in personal care products (originally submitted by Michelle Condon, MD)
2. Supporting the efficient transition

of Veteran medics to civilian paramedics and protecting consumers' information on all health insurance marketplaces (both originally submitted by Jayne Courts, MD).

Kent County Delegates certainly are paying attention and being proactive in making changes.

CHAC Names Fletcher At-Large Committee Member

Medical Student Nicolas K. Fletcher was recently named an at-large committee member for the Community Health Advisory Committee.

The Community Health Advisory Committee (CHAC) was established by the Kent County Board of Commissioners in 2001, in order to expand community participation in public health issues, to function as Health Department ambassadors in the community and to be the Health Department's "eyes and ears" in the community. CHAC operates in an advisory capacity and provides input targeted towards specific health issues identified by the Health Department. Committee members include two members of the Board of Commissioners, one member at large, one member from a faith-based organization, two members from community-based organizations, three members from health care providers, and one member each from the Kent Intermediate School District and the Kent County Department of Health & Human Services. Annually, CHAC will evaluate its effectiveness with the submission of a performance self-assessment related to CHAC's purpose, and the level of member support lent to Health Department initiatives. It will also be asked to provide input to the County Administrator/Controller regarding the effectiveness of the Health Officer and the Medical Director.



Dr. Patrick Droste and MSU-CHM students



Dr. Patrick Droste with Jessica Frost, Felicia Nip and Rohit Abraham

MSU-CHM Students Learn Basics of Resolution Writing

KCMS Delegates Drs. Jayne E. Courts and Patrick Droste met with MSU-CHM students to discuss the basics in resolution writing. Students were able to share proposed ideas for resolutions and worked on drafts to articulate those ideas.

KCMS Membership Survey

The KCMS Board of Directors is conducting a brief survey to collect feedback from you, to ensure that our Society is providing its members the information that want and need. Thank you for your time and Membership.

1. What is your overall level of satisfaction with your KCMS Membership?

- ☐ Very satisfied ☐ Dissatisfied
☐ Satisfied ☐ Very Dissatisfied
☐ Neutral/No opinion

2. Please rate the following in terms of quality:

	Excellent	Good	Fair	Poor
Annual Meeting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bulletin Magazine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CME Saturdays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Networking/social events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Informing members of issues facing the profession	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local advocacy (and/or Lansing, Washington)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Over the past year, which of the following KCMS events have you attended? (Choose all that apply)

- ☐ Annual Meeting
☐ CME Saturday
☐ Mission Medicine Symposium
☐ Art Prize Sneak Peek Event
☐ KCMS Forum
☐ Committee meetings
☐ House of Delegates related meetings

4. If you were on the KCMS Board, what changes would you make?

5. Do you routinely read the *Bulletin* magazine? If so, in which format? (Choose all that apply)

- ☐ Electronically ☐ Both
☐ Hard Copy ☐ Don't Read it

6. Please let us know what issues concern you now. What do you want to hear more about? (Choose all that apply or fill in the blanks).

- ☐ Payment Reform
☐ How to work with Federal Government
☐ Accountable Care Organizations
☐ Affordable Care Act
☐ Scope of Practice
☐ Health Policy work
☐ Medical Marijuana
☐ Office practice issues
☐ Electronic Medical Records
☐ Continuing Medical Education

☐ _____

☐ _____

☐ _____

7. Finally, please share any topics or issues that you feel KCMS may help with to assist you. Please suggest CME topics or other timely issues that you would like to see KCMS highlight for its members.

SURVEY RESPONDERS WILL BE ENTERED IN A DRAWING TO WIN A \$50 GIFT CARD TO THE GILMORE COLLECTION! If you wish to be included in a Responders' Door Prize, please list your name for us.

If you do not, your anonymous input will be equally appreciated.

Signed: _____

Printed: _____ **Contact Phone Number:** _____

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vaccinate!**



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Are you 60 years of age or older?

Did you know 1 in 3 older adults will develop *SHINGLES* in their lifetime?

Ask any adult who has suffered from shingles, and they will tell you it is an extremely painful experience. The virus causes a painful skin rash that, even though it heals within 2 to 4 weeks, can cause nerve pain that lasts for months.

Anyone who has had chickenpox in the past is at risk.

No Insurance? No problem!

The Kent County Health Department has the Zostavax shingles vaccine available for adults 60 and older who do not have insurance or have insurance that does not cover vaccines, including those adults without Medicare Part D.

There is no cost for the vaccine, however, a \$0 to \$23 dollar administration fee based on income will apply. We accept cash, check, MasterCard, Visa or Discover.

More information can be found at www.accesskent.com/immunizations.

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Delegates Brainstorm Resolutions

Delegates met with ideas that will become more than 20 Resolutions submitted by the Kent Delegation. Led by Delegation Chair, Domenic Federico, MD, the room was filled with interesting and provocative discussion and suggested resolutions. The 2016 MSMS House of Delegates will convene on Friday and Saturday, April 30 and May 1 in Dearborn. If you are interesting in serving as a Delegate, contact the KCMS Office at 458-4157.



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DIANA CHEN

MD Candidate,
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OPEN LETTER

Dear American Board of Pediatrics:

On December 17, 2015, at 3:01 in the middle of my busy day seeing patients, I voluntarily gave up my American Board of Pediatrics certification. I thought I should write this letter, hopefully preempting any more threatening emails warning me that I must pay up or lose my certification. This was not mere oversight on my part. This was purposeful.

The reason I am no longer ABP certified has nothing to do with my education or skill. Indeed, I've easily passed my board examination twice. Like a compliant pediatrician, I enrolled in MOC in 2010, paid my \$1000 and completed all my educational requirements. I participated and completed all my MOC requirements again in 2013 and 2015.

I have disrupted my office flow to ask patients to rate me on my hand washing and I've sent that data to the ABP. Twice. I have disrupted my office flow to ask patients to rate me on my ability to give them flu shots and I've sent that data to the ABP. I have dutifully completed your proprietary CME modules. I have submitted to and passed two secure examinations where I was treated as a near-criminal. Up until December 17 at 3:00, I did everything you asked.

But when I was threatened with loss of certification if I didn't give another \$1,300, I finally had enough. The fact that the ABP can completely strip qualified and competent pediatricians of board certification for not paying more money is further evidence that MOC is all about the money. A quick glance at your tax records makes it abundantly clear that this IS all about the money.

It's about the president earning \$1.3 million, but not doing MOC himself. It's about first class airfare for board members and their spouses and \$1.2 million spent on board meetings and conferences. It's about \$102 million in total assets in 2013, skyrocketing up from \$65 million just 4 years earlier. It's about an elite group living lavishly while front-line pediatricians slave away complying with never-ending hoops and ever-increasing fees.

And that's why I didn't pay. I can't continue to fund this type of coercion. Those funds are used to change MOC rules on a whim and to threaten pediatricians into compliance. While the ABP board was enjoying holiday preparations with their families, thousands of pediatricians were scrambling desperately to complete their MOC by Dec. 17. Social media groups and message boards were full of physician moms and grandmothers looking for support as ABM MOC was pulling them away from family events to take tests, run reports on patient charts, and then cough up \$1,300 out of fear. This breaks my heart. The ABP should be ashamed of themselves and what they're doing to our colleagues. The ABP board should be ashamed of what they've done to the reputation of the ABP.

On one hand, I am sad about giving up my ABP certification. I remember the elation I felt when I passed my boards after residency. I really felt like I had accomplished something and that my certificate represented my professional educational commitment to pediatric medicine. Now, after seeing the monster that board certification has ballooned into, I'm very happy to be off the MOC hamster wheel and no longer supporting a corrupt system that punishes very



good doctors and pushes our most experienced pediatricians into early retirement.

As it stands, something with American Board of Pediatrics MOC must change. As pediatricians, we've joined the rest of our physician colleagues across all specialties pleading for MOC to end. It must return to a one time examination after residency, maintained by holding an unrestricted state medical license and completing CME hours of our choosing. Ongoing secure examinations must end, limitation to ABP and AAP proprietary CME must end, the outrageous fees must end, and the time-consuming busywork of "Part 4 Practice Improvement Modules" must end. MOC must be egalitarian for all pediatricians, without exemptions or lowered fees for favored groups.

These are not just my isolated musings, this is what 4,000 of my pediatric colleagues have requested in petition at peds4mocreform.org. This is what 23,000 physicians have signed under Dr. Paul Tierstein's petition.

If past behavior of the ABP is any indication, I'm sure there will be more board meetings, work-groups, and pilot programs to tinker with MOC, to make it more "integrated" with our practices. Dr. David Nichols will write another blog post letting us know you are listening and have tinkered some more.

It's all this flailing around and tinkering that makes me realize you don't get it. We aren't asking you to tinker and integrate MOC, we're asking you to stop. The ABP keeps arbitrarily changing rules, and will continue to control us with these never-ending changes.

I really don't think the ABP will be able to end MOC until we are allowed to stop participating. In order for us to stop participating, we have to conquer the one thing that keeps us in compliance: fear.

So in 2016, while the ABP meets and tinkers, I will focus on ending the fear. I will focus on freeing pediatricians from MOC requirements for hospital privileges and insurance credentialing, so MOC is truly voluntary. I will focus on educating my colleagues about alternative board certification options that treat us fairly and professionally like the National Board of Physicians and Surgeons, so there is choice.

In the end, I truly hope the ABP regains some measure of credibility and respect among practicing pediatricians. That will only come by respecting us as the professionals and colleagues we are, and not siding with the many other forces that are piling never-ending requirements, regulations, fees, and abuses upon us in the pursuit of power and financial gain.

Sincerely,

Megan M. Edison, MD

Sign the petition to
end Pediatric MOC:
peds4mocreform.org

Contact the ABP
www.abp.org/contact

Learn More
www.right2care.org



Join Us

KCOA MEETINGS OF INTEREST

APRIL 4, 2016

LEGISLATIVE COMMITTEE LUNCHEON

Masonic Center, 4th Floor | Noon

APRIL 17-23, 2016

2016 NATIONAL OSTEOPATHIC MEDICINE WEEK

MAY 12, 2016

MOA HOUSE OF DELEGATES

Royal Dearborn Hotel and Conference Center (Formerly Hyatt)

MAY 13-15, 2016

ANNUAL SPRING SCIENTIFIC CONVENTION

Royal Dearborn Hotel & Convention Center
600 Town Center Dr, Dearborn, MI

JUNE 16-19, 2016

2016 NMOA ANNUAL SUMMER CONFERENCE

Mackinac Island, MI

For more information, please visit www.domoa.org
or call 517-347-1555 x100

Paging All Seniors!

Join Us for a Social Breakfast Gathering for "The IV Leaguers"



No agenda. No tasks. Just an opportunity for the KCMS and KCOA to host retired members. A great chance to connect with returning snow birds and catch up!

WEDNESDAY, APRIL 27 | 7:30-9AM

The Omelette Shoppe

Breton Village Shopping Center
1880 Breton Rd SE, Grand Rapids, MI 49506

RSVP: Mariana at 458-4157
or kcmsoffice@kcms.org.

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Jennifer Hemingway, DO
KCOA President,
Board of Directors

PRESIDENT'S MESSAGE

Consider Serving as a Delegate

It is hard to believe we are already looking at Spring 2016. Members of the KCOA Board met to discuss some strategic initiatives and plans for 2016-2017. Watch your mail for more information and your opportunity to provide input and guidance on medical education opportunities, membership objectives and ways to include our medical students and osteopathic residents.

The MOA is pleased to announce the 117th Annual Spring Scientific Convention in Dearborn, MI. The convention will be held May 12-15, 2016, at the Edward Village Michigan. The Edward Village Michigan (formerly the Adoba) is just minutes away from "The Henry Ford-America's Greatest History Destination" and Greenfield Village. Get your CME and experience a history adventure!

Note that this year, a "Weekend Only" option is available! With 18 CME hours available, the Weekend Only option allows access to the weekend sessions at a reduced rate.

For registration information, visit the Michigan Osteopathic Association website at domoa.org.



Would you like to serve as a Delegate?

Michigan Osteopathic Association House of Delegates

Thursday, May 12, 2016
Edward Village Michigan
Formerly the Adoba
600 Town Center Drive
Dearborn, MI 48126
Contact the KCOA office at 616-458-4157

Michigan Osteopathic Association Annual Spring Scientific Convention

May 12-15, 2016

Edward Village Michigan
Formerly the Adoba
600 Town Center Drive
Dearborn, MI 48126
PH: 313-592-3622

MOA Discounted Rate: \$112 per night
(Use code "345" for discounted rate)

CME anticipated: 1-A, 30
(Pending approval of the AOA CCME)



KENT MEDICAL FOUNDATION



Jayne Courts, MD
2015 KMF President,
Board of Trustees

Reflecting on a Successful Year, Shifting Focus to Future

As we close one year where we were able to bless other organizations with financial gifts, we look forward to a new year filled with new opportunities. During the Kent Medical Foundation Board of Trustees final meeting of 2015, we made decisions to improve our investments and budget so that we can continue our work as a charitable foundation.

We reviewed our progress in archiving old records. The history of Kent County Medical Society and Kent Medical Foundation is interesting and humbling as we acknowledge the work and foresight of physicians who practiced long before us. They set a high bar of exemplary work representing their patients and the greater community.

KMF has been funding support for various projects for more than fifty years, helping many in our community with educational endeavors whether exploration of health-related careers or medical education. Since 2009, the KMF has embarked on enhanced strategic initiatives focusing on local service projects that encourage health awareness and illness prevention. Your generosity enables the KMF Board to further these endeavors.

CURRENT PROJECTS OF SUPPORT

- **Catherine's Health Center Service-enhanced Learning:** Purchase of a lap top computer for use by physicians and MSU-CHM students serving at-risk families.
- **Fit Kids 360**, six-week courses for parents and children to inspire activity. This program directly partners with local

pediatricians' offices and local non-profits to encourage good habits and activities to create healthier families.

- **Nico Team**, a ten-year partnership program to educate local students on the hazards of tobacco use.
- **Mission Medicine Symposium**, underwriting in sponsorship with KCMS, Kent County Osteopathic Society (KCOA), and Calvin College in providing a medical education course on mission medicine topics.

We have completed our 2015 Holiday Card Campaign—although we are always happy to accept donations to KMF. We continue to explore options to improve our fundraising capabilities. We would like to support more organizations in the future, and we welcome any ideas for organizations to support and better ways to support them.

We have nominated new officers for 2016. I will be handing the reins over to Dr. Kathleen Howard who will capably carry the Kent Medical Foundation forward. I have enjoyed the opportunity to guide an amazing and dedicated group of people on the KMF Board, and I am pleased to have the opportunity to continue serving as a trustee next year.



KENT MEDICAL FOUNDATION

WOULD LIKE TO THANK THOSE WHO GENEROUSLY SUPPORTED OUR HOLIDAY CARD CAMPAIGN!

Dr. Mary Appelt
Jeff and Anita Avery
Dr. John and Carol Beernink
Brad and Irene Betz
William and Jill Beute
Dr. Scott Brundage
Dr. Chris and Amylynn Buchach
Martin and Susan Bury
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Doug and Amy Vander Woude
Wayne and Shelley VanderKolk
Drs. Rose Ramirez and John vanSchagen
Rik and Kitty Vydareny
James and Janet Watkins
Dr. and Mrs. Vernon E. Wendt
Drs. David and Vicki Whalen
Peter J. and Karen J. Wiebenga
Jerry and Kathy Wittingen



Marybeth Weber
KCMS Alliance President

Alliance Heartbeat

Our annual Holiday Tea was held at the home of Dr. Joseph and Jeanette Marogil. We hosted a fun group and a huge donation was collected for Safe Haven Ministries and delivered by Connie Meade and Kim Shammass. The next day, Karen Begrow and her committee hosted a wonderful Party for the Early childhood education classes at Baxter Community Center. Those children were indeed ecstatic about so many new toys and educational materials for their classroom.

Thank you to our medical community and to Grand Rapids for being part of the A DOSE OF GENEROSITY Charity Event on January 30th! It was a sparkling evening and well worth the effort of many, many people in our medical community. We generously funded two charity grants with that event.

The YWCA Nurse Examiner Program, which has a new program offering emergent medical-forensic examinations for children, will have new equipment, including a Pediatric Colposcope.

Family Promise of Grand Rapids will have the funding it needs to help 60 children move from "homeless" to "housed", providing lasting health benefits to these children and to our community here in Grand Rapids.

CONTINUED ON PAGE 25



The finished Baxter Community Center playground that was built with the money raised from the 2015 fundraising event.



KCMSA members organizing classroom gifts for Baxter Community Center.



Members enjoyed the Annual Holiday Tea



KCMSA Members, Kyla Fletcher and Tracy Anderson



Kim Shammas and Connie Mead at the Holiday tea with a car load of donated items for the Safe Haven Women's Shelter.



Save the Dates

Tuesday, March 8

Dinner & Spring Table Ideas Event (Social Event)

March (Date TBD)

Gourmet Club (Watch your email for details)

Tuesday, April 19

Annual Spring Luncheon Meeting 12-2 p.m.
at Women's City Club (babysitting will be available)

Saturday, May 7

Kentucky Derby Party

Judge Gardner's Closet Gathering is April 19

At our Spring Luncheon at the Women's City Club on April 19th, the Alliance will be holding its "Annual Gathering" for Judge Gardner's Closet. The Gathering supports those teens who are moving into independent living upon reaching their 18th birthday.

These young people have been Wards of the Court for many years because parental rights were terminated at some point in their lives. Unfortunately, these are the

individuals who were never adopted, but now must go forward as an adult. These young people truly have nothing, and Alliance members have been wonderful in their generosity to help them have "something". We are the only organization in Kent County that supports this initiative.

In past years, Judge Gardner has said, "Thank you for being guardian angels for our youth." I think we always hope that what we do and what we give makes a difference...this does. So,

once again this year...because the need is always ongoing...I am asking Alliance members to bring new or gently used items that can be used to help a young person make a home, such as bedding, towels, and kitchen items, to our meeting on April 19th.

Thank you in advance for your kindness and generosity!

Andrea Haidle,
*KCMSA Liaison
for Judge Gardner's Closet*



YWCA Honors Andrea Haidle for Community Service

Since 1977, the YWCA's annual Tribute Awards have honored more than 175 women representing a distinguished sorority of leaders and trail-blazers. The Tribute luncheon, where honorees receive formal recognition, is one of our community's most popular and widely-supported celebrations. KCMSA long standing, active member Andrea Haidle received the Community Service Award for 2015, several members attended the awards luncheon honoring Andrea. Congratulations Andrea!



Unwrapping holiday fun.

PRESIDENT'S MESSAGE

CONTINUED FROM PAGE 22

This event was a truly collaborative event spearheaded by the committee of: Christina Rosloneic, Jennifer Bruce, Susan Jebson, Mindy Tiede, Blesie Beaumier, Alexis Boyden, Kathy Kendall and Eileen Brader. Each of them had many helpers and we would be remiss if we didn't mention that we had many community sponsors, auction donors and caring individuals who helped make this event a success.

After an extremely successful A DOSE OF GENEROSITY Charity Event last weekend, we are riding high and ready to get back in the saddle with other KCMSA events! A couple of fun upcoming events are detailed on page 23, so please mark your calendars! You may also check out our calendar at KCMSAlliance.org.



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—DANIEL O’CALLAGHAN



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 616.698.50000



2016 Charity Event **A Dose of Generosity**

Guests enjoyed their time at the A DOSE OF GENEROSITY Charity Event at New Vintage Place. The evening included signature cocktails, the twist auction, a strolling dinner, a live auction, and an after-glow party. There was even gong banging and wine pulling! Funds raised this year will benefit Family Promise and the YWCA Nurse Examiner Program. Thank you for your support in making this event a success!





MSU COLLEGE OF HUMAN MEDICINE



Angela Thompson-Busch, MD, PhD
Assistant Dean, Michigan State
University College of Human
Medicine Grand Rapids Campus

Students to Embark on a New Way to Learn Medicine

In the three month tenure of my new position as the community assistant dean for MSU College of Human Medicine in Grand Rapids, I have learned that medical school education is undergoing a tremendous amount of change and ingenuity throughout the world. After a century of medical education that started with two years of basic science learning, followed by two years of clinical experience, we have realized that experiential learning is more valuable throughout the four year curriculum.

Here at Michigan State University College of Human Medicine, we are leading the way in designing a novel new curriculum unlike any other in the country. The entering medical school class in late August will embark on a new way of learning medicine with our Shared Discovery Curriculum. After a few weeks of preparation, they will be placed in one of four learning societies (not unlike the sorting that takes place at Hogwarts). For the next four years, students will learn medicine with their learning society leaders and peers.

In the first year, students will have two half-days in the clinic learning medicine in a way that is useful to both the student and the clinic. Students will act as medical assistants taking histories and blood pressures, giving vaccinations and educating patients. The rest of the week students will learn about a chief complaint. Chief complaints will range from abdominal pain, to hypertension, dementia and joint pain. During each week, the students will immerse themselves in learning all of the basic science and clinical science behind these complaints in an integrated fashion through didactics, simulation, and self-directed learning.

The clinical and basic science faculty in East Lansing and Grand Rapids have been working diligently to prepare for the launch of Shared Discovery and are now starting to pilot sessions with students who plan to matriculate this fall. This venture will “take a village” and require learning from respiratory therapists, nurses, dietitians, pharmacists, medical assistants and many local clinics in town. We are so excited to get started and really believe this is going to be an extraordinary learning experience for both the students and the faculty!

This venture will “take a village” and require learning from respiratory therapists, nurses, dietitians, pharmacists, medical assistants and many local clinics in town.



Mark Hall, MD, MPH
& Chelsey Mahoney

KENT COUNTY HEALTH DEPARTMENT

What Does the Future Hold for Zika Virus in U.S.?

On Monday, February 1, the World Health Organization held an emergency meeting to discuss efforts to battle Zika Virus and classified the emerging infection as a public health emergency of international concern. The virus is currently causing outbreaks in countries throughout Central and South America.

On Thursday, January 28, the WHO claimed that the virus was “spreading explosively” and estimated that 3 to 4 million cases would occur in the region over the next 12 months. With predictions that Zika Virus will “spread across the Americas,” what should physicians in West Michigan expect with regard to this emerging disease? Examining the epidemiology of Dengue Fever may offer a clue as to how the United States and Michigan will be impacted by Zika Virus.



KCHD

Dengue is the most common mosquito-borne viral disease of humans and 2.5 billion people live in areas where Dengue viruses can be transmitted. The WHO estimates that 50 to 100 million infections occur annually, including 22,000 deaths, mostly among children. While Dengue infects millions of people worldwide, its impact in the United States has been relatively minor. The CDC’s Summary of Notifiable Infectious Diseases and Conditions indicated that there were 837 reported cases of Dengue fever in the United States in 2013, of which 794 were travel-associated. The most common destinations of travel were Puerto Rico, the

Dominican Republic, Mexico, India and Haiti. States with the highest number of cases included Florida (151), California (119) and Texas (95). There were 16 cases reported in Michigan. Although information on travel history is not available for cases reported in 2014, the number of reported cases decreased to 459, with nearly half being reported in California, Florida and New Jersey. In 2014, three cases were reported in Michigan. There were no cases reported in Kent County.

Similar to Zika virus, Dengue is transmitted by the *Aedes aegypti* and *Aedes*

CONTINUED ON PAGE 30

While Dengue and Zika are similar with regards to transmission and the two viruses cause similar symptoms (fever, rash, and joint pain being the most common), Zika virus has recently been associated with birth defects and poor pregnancy outcomes in Brazil.

albopictus mosquito. In order for transmission to occur, the mosquito must feed on an infected person during a 5-day period when large amounts of virus are in the blood, which usually begins slightly before the person becomes symptomatic. Individuals who are asymptomatic can also infect mosquitoes. After the virus enters the mosquito, it requires an additional 8-12 days of incubation before it can be transmitted to another human. The mosquito remains infected for the remainder of its life, which may be days or a few weeks. The Aedes species of mosquito prefers warm, humid climates and its habitat in the U.S. to date has been restricted to the southeastern states. Characteristics of the U.S. environment, including mosquito control programs, advanced infrastructure, and the use of air conditioning and screens as barriers to mosquitoes have been identified as reasons that domestic transmission of these mosquito-borne viruses has been minimal.

While Dengue and Zika are similar with regards to transmission and the two viruses cause similar symptoms (fever, rash, and joint pain being the most common), Zika virus has recently been associated with birth defects and poor pregnancy outcomes in Brazil. While the association between Zika Virus infection and birth defects continues to be investigated, physicians in West Michigan must be aware of how to counsel pregnant women with travel history to the affected regions and parents of children who may have been born to an infected mother.

On January 29, CDC released guidelines for health care providers in the U.S. who are caring for infants born to mothers who traveled to or resided in an area with Zika virus transmission during pregnancy. Zika virus testing is recommended for the following patients:

1. Infants with microcephaly or intracranial calcifications born to women who traveled to or resided in an area with Zika virus transmission while pregnant, or
2. Infants born to mothers with positive or inconclusive test results for Zika virus infection.

The diagnosis of Zika virus infection is made through molecular and serologic testing, including reverse transcription-polymerase chain reaction (RT-PCR) for viral RNA and IgM ELISA and plaque reduction neutralizing test (PRNT) for Zika virus antibodies. Currently, Zika virus testing is performed only at the CDC and some state health departments. If you suspect Zika virus in an infant for which you are providing care, contact the Kent County Health Department (616-632-7228) in order to facilitate testing.

As the situation surrounding Zika virus continues to evolve, it is important that physicians continue to stay up to date on the CDC's recommendations for patient management. The latest information can always be found at www.cdc.gov/zika. The Kent County Health Department will continue to monitor the situation and will communicate to the local healthcare community when the need arises.

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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

December, 2015

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

DISEASE	NUMBER REPORTED		MEDIAN CUMULATIVE
	This Month	Cumulative 2015	Through December 2010-2014
AIDS (Cumulative Total - 974)	1	19	22
HIV (Cumulative Total - 492)	1	24	N/A
AMEBIASIS	0	5	4
CAMPYLOBACTER	12	96	69
CHICKEN POX ^a	1	22	38
CHLAMYDIA	328	3823	3539
CRYPTOSPORIDIOSIS	0	14	17
Shiga Toxin Producing E. Coli	1	13	15
GIARDIASIS	6	61	93
GONORRHEA	64	777	724
H. INFLUENZAE DISEASE, INV	3	15	5
HEPATITIS A	0	1	2
HEPATITIS B (Acute)	1	1	4
HEPATITIS C (Acute)	0	0	2
HEPATITIS C (Chronic/Unknown)	35	509	282
INFLUENZA-LIKE ILLNESS ^b	3808	44250	49454
LEGIONELLOSIS	0	10	10
LYME DISEASE	3	16	4
MENINGITIS, ASEPTIC	3	62	40
MENINGITIS, BACTERIAL, OTHER ^c	2	21	8
MENINGOCOCCAL DISEASE, INV	0	0	1
MUMPS	0	0	0
PERTUSSIS	0	20	9
SALMONELLOSIS	1	42	57
SHIGELLOSIS	4	62	11
STREP, GRP A, INV	2	33	24
STREP PNEUMO, INV	7	60	51
SYPHILIS (Primary & Secondary)	0	18	9
TUBERCULOSIS	1	19	18
WEST NILE VIRUS	0	0	1

NOTIFIABLE DISEASES OF LOW FREQUENCY

DISEASE	NUMBER REPORTED Cumulative 2015	DISEASE	NUMBER REPORTED Cumulative 2015
Kawasaki Syndrome	5	Creutzfeldt-Jakob Disease	1
Streptococcal Toxic Shock	2	Toxic Shock	1
Guillain-Barre Syndrome	2	Hepatitis E	1
Cyclosporiasis	1	Malaria	4
Typhoid Fever	1	California Encephalitis	1

a. Chickenpox cases are reported primarily from schools. Confirmed and probable cases are included.

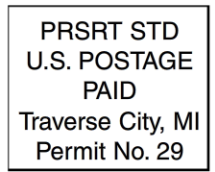
b. Includes "Influenza-Like Illness (ILI)" and lab-confirmed influenza. ILI cases have flu-like symptoms and are reported primarily by schools.

c. "Meningitis, Bacterial, Other" includes meningitis and bacteremia caused by bacteria OTHER THAN *H. influenzae*, *N. meningitidis*, or *S. pneumoniae*.

Except for Chickenpox & Influenza-Like Illness, only confirmed cases (as defined by National Surveillance Case Definitions:

<http://www.cdc.gov/nndss/script/casedefDefault.aspx>) are included.

Reports are considered provisional and subject to updating when more specific information becomes available.



Kent County Medical Society
Kent County Osteopathic Association
233 East Fulton, Suite 222
Grand Rapids, MI 49503

Consider Joining a KCMS Committee

The KCMS Board of Directors welcomes members' involvement in committees.

The following committees have openings:

Editorial Committee

Function: To review editorial content and to review the layout and design of the Bulletin. Assist the KCMS Staff with edits of the quarterly magazine, the Bulletin, via email and phone.

Legislative Committee

Function: To be patient advocates and to educate area legislators of the effects of proposed legislation on the practice of medicine. The committee meets at Noon on the 2nd Monday of most months and welcomes involvement by elected officials every other month.

Membership Committee

Function: To review all applications for membership, make recommendations of membership to the Board of Directors, have responsibility for retaining members, and conduct an orientation of new members. Members work with KCMS staff by emailed document transfers and phone calls.

Peer Review Committee

Function: To hear and review all matters pertaining to problems between complainants and members of this Society which shall be brought before it in writing, or in person and subsequently reduced to writing. The committee meets as needed.

Contact the KCMS office today at 616.458.4157 to make your choice.