

THE Bulletin

NOVEMBER 2013 Volume 90, Number 11



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SHAFI AHMED, MD**

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THE Bulletin

Read by 96% of GCMS members.

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Our Vision

That the Genesee County Medical Society maintain its position as the premier medical society by advocating on behalf of its physician members and patients.

Our Mission

The mission of the Genesee County Medical Society is leadership, advocacy, education, and service on behalf of its members and their patients.

PLEASE NOTE

The GCMS Nominating Committee seeks input from members for nominations for the GCMS Presidential Citation for Lifetime Community Service. The Committee would like to be made aware of candidates for consideration.

THE BULLETIN

Published by the Genesee County Medical Society Publication Office
4438 Oak Bridge Drive, Suite B, Flint, Michigan 48532
Phone (810) 733-6260 Fax (810) 230-3737

By subscription \$60 per year. Member subscription included with Society dues. Contributions to THE BULLETIN are always welcome. Forward news extracts or material of interest to the staff before the 5th of the month. All statements or comments in THE BULLETIN are the statements or opinions of the writers and are not necessarily the opinion of the Genesee County Medical Society.

This publication
designed and
edited by



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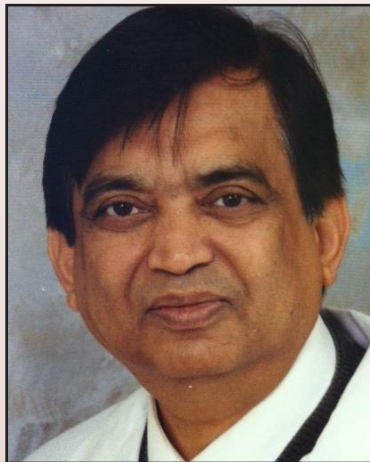
WE MUST BE AMBITIOUS

I am honored and humbled to have the privilege of serving as President of the Genesee County Medical Society. Having had a year to anticipate this responsibility, now that it is here, it is time for action. Of course, I am not alone in this role. We together will face the challenges confronting the practice of medicine. With our team we are ready to meet those challenges and prevail.

I would like to thank Dr. Raymond Rudoni and those Presidents who served before him, who have paved the way. GCMS leadership has been strong, propelling this organization into the spotlight of organized medicine. I also want, in advance, to thank our Executive Director Peter Levine for his guidance through the intricacies of what promises to be a challenging year.

The practice of medicine is in a crossroads. With the implementation of the Accountable Care Act and the 32 million newly insured patients poised to enter the system, changes to practice models, the requirement of EHRs and the introduction of ICD-10, it is easy for a physician to feel threatened and alone. It is more than ever important for physicians to face these challenges together with a single voice. County medical societies, state medical societies and the AMA represent the best avenue to face these challenges. We can only influence our future if we are united on the issues that matter most to us and to our patients.

GCMS is one of the few county medical societies that meet regularly with our legislators to hear from them and help them understand our perspectives on legislation



Shafi Ahmed, MD

impacting our patients as well as our ability to care for our patients, who are also their constituents.

Our strength lies not only in our number but also in the diversity of our involvement. The contributions made by the International Medical Graduates section, led by Drs. ApaRao Mukammala, Amitabha Banerjee, Abd Alghanem, Venkat Rao and many others have been spearheaded by the GCMS contingent. Many of the officers have been from our contingent of physicians. This diversity has made GCMS one of the most noted county medical societies

in our state. During this year, with the help of all our component sections, I want to enhance our role of leadership in forefront of medicine through involvement in the County, State and National Societies.

Expansion and retention of membership has been, perhaps our dominant endeavor lately. Membership is important and we all need to be active in recruiting colleagues, for in numbers there is strength and with numbers comes financial stability. We need to promote "belonging." But involvement is critical; cheerleaders help make the adrenalin rise, but winning is sustaining.

I will lead, carrying the GCMS banner wherever I go, but it is all of us working together that will make the difference in what will follow. Together GCMS has a legacy of which I am proud. Indeed I am humbled to have been called upon to lead.

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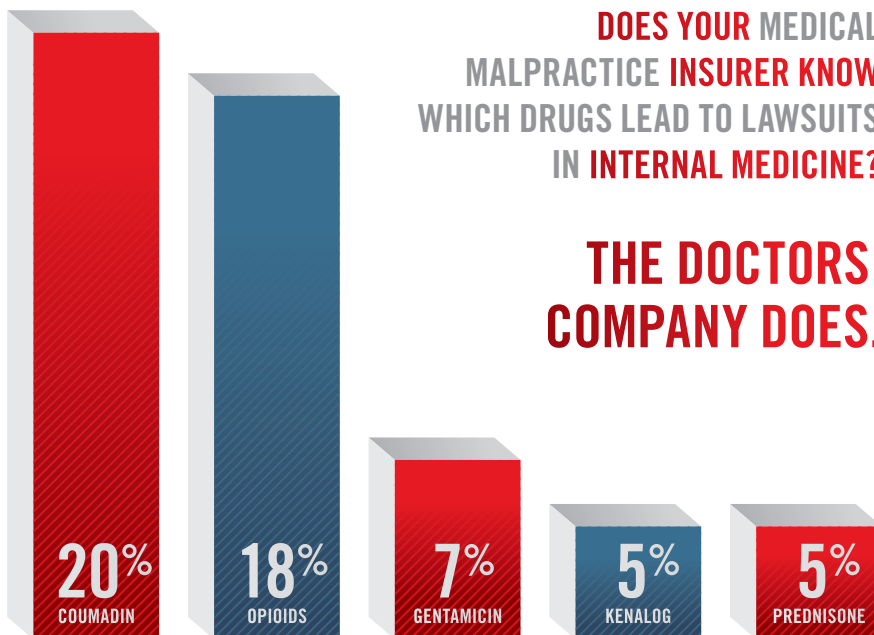
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ALONE AGAIN (NATURALLY)

“Better be alone than in bad company.”
John Clarke (1596 – 1658)

The definition of a small business varies from country to country and author to author but the fact of the matter is, most medical practices would fit the usual criteria for a small business. Just 13 short years ago, more than half of the physicians in the United States worked in a private solo or independent practice situation. By the end of this year that figure will fall to about 36% and this downward trend in the number of solo medical practices will likely continue and possibly accelerate. The causes of this dramatic shift are many but the chief factor seems to be the increased burdens of operating a small business.

A 2012 survey done by the Association of American Medical Colleges revealed that only 1 in 100 medical school graduates anticipated moving into a career as a solo practitioner. More than 60% envisioned a situation with a large group practice, in partnerships with hospitals, or as an employed physician. Others looked forward to a career in academia, another type of employed physician.

Apparently, being in private solo practice has its downsides. The rising administrative headaches of running a business along with declining reimbursements and an increase in the availability of positions in group practices are strong incentives for newly minted doctors to avoid going solo. There is increased government scrutiny of medical practice operations, compliance headaches, and competition from large medical groups, both private and those owned and operated by hospitals and health plans. Many physicians report that they “just want to practice medicine” and are anxious to shed the daily hassles of managing a for-profit enterprise. Sacrificing control of



Daniel Ryan, MD

one’s practice can seem like a reasonable compromise. The Accountable Care Act actually provides incentives for physicians to join networks that encourage working with other physicians, hospitals, and insurance companies.

Solos are at risk from lack of referrals, a shrinking patient base, shifting patient allegiances because of insurance carrier changes, and lost income due to vacations, illness, and long term disability. Overhead expenses can be a larger percentage of a practices’ gross receipts in a private solo practice if the proprietor is not extremely diligent. Also, call coverage can be

problematic. Questions that solo doctors need to grapple with can range from being a source of consternation to being downright terrifying. Should I hire an associate, bring in a partner, employ physician extenders such as physician assistants or nurse practitioners? Should I join a larger group or independent practice association, or just sell my practice and retire to Belize?

With all the negatives associated with solo practice, why would anyone be nutty enough to even consider this practice model? The most powerful motivating factors are autonomy and closer bonds with patients. Private solo physicians can provide high quality, cost effective care as well as, or better than, alternative medical practice models. However, will the lure of more control over one’s professional life and a more satisfying patient-doctor relationships overcome the factors that drive people away from going it alone? Time will tell. The solo men and women will have to be adaptable and optimistic. Unfortunately, optimism alone is not a great business strategy.

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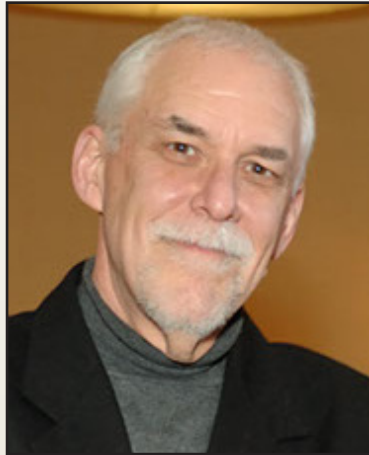


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COME TO THE BALL AND WELCOME A NEW PRESIDENT

It's time to have some fun. On November 9, the Presidents' Ball will take place and everyone is invited. If you don't come, you're going to miss a lot of fun. It's also a chance to thank Dr. Ray Rudoni for a terrific year, and to welcome Dr. Shafi Ahmed to his year in The Chair. Your leaders give so much of their time. Committee members, committee chairs, board members, delegates, alternate delegates, officers are so committed to the future of the profession of medicine. This is one of those fun times when everyone gets together and just relaxes.

I suspect Dr. Rudoni is not going to relax, though. I think he's ready for a new president. Every president is entitled to a replacement and an opportunity to sit back and think about the year that passed.



Peter Levine, MPH

This issue of *The Bulletin* contains a biography of Shafi Ahmed. Every November we introduce you to your new president with some historical background and some of their perspectives. Please take a moment to take a look at it. In addition, I would like to welcome Sherry Smith, our new secretary. She is stepping in, following some fantastic staff. We wish Becky all the happiness in the world with her new baby. We thank Marcia Gzym for her incredible help during Becky's time away from the office, and hope that everyone will make Sherry feel most welcome. She will be there for you at 733-9923, ssmith@gcms.org. I hope you enjoy her. I know she will enjoy all of you. I've known her for many years and I am very excited to work with her.

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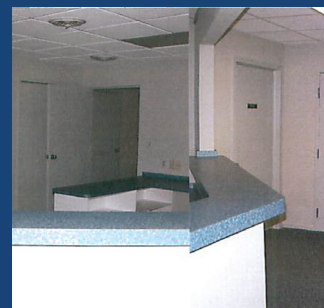
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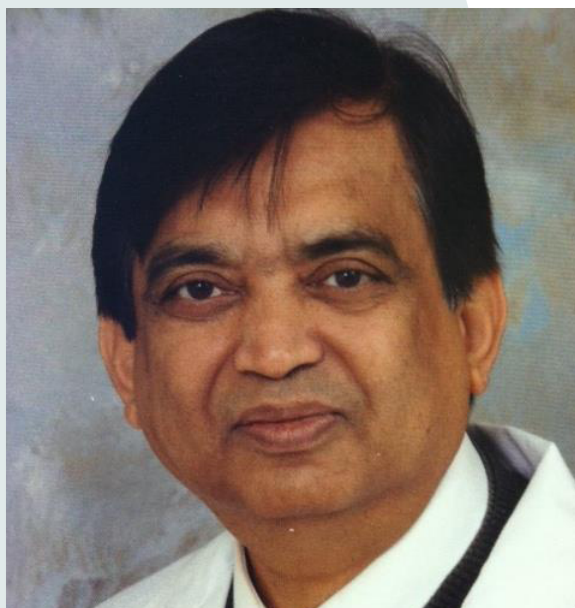
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Meet Shafi Ahmed, MD

President GCMS 2013-14

One of the amazing things about Shafi Ahmed, GCMS president of 2013 and 2014, is that in some ways he's a typical international medical graduate who has become a leader in this community. He has been buffeted about by politics; his family has had its ups and downs, and he lived in several countries before moving to the United States.

All of these experiences combine to create a leader.

Dr. Shafi Ahmed is an internist who practices at Court Street Family Medicine. His background is fascinating.

Dr. Ahmed's father was a physician who also owned a pharmacy in Bangladesh. Following independence in 1947, the pharmacy grew into a district-wide medical/pharmaceutical business, importing pharmaceuticals to East Pakistan. In 1971 after the Liberation War, even though the

Ahmed family did not support the East Pakistan Army, they had to flee from their home of Jessore and move from village to village to survive. Their house in Jessore was burned down, as was their business. They were ultimately robbed of everything, but their whole family survived.

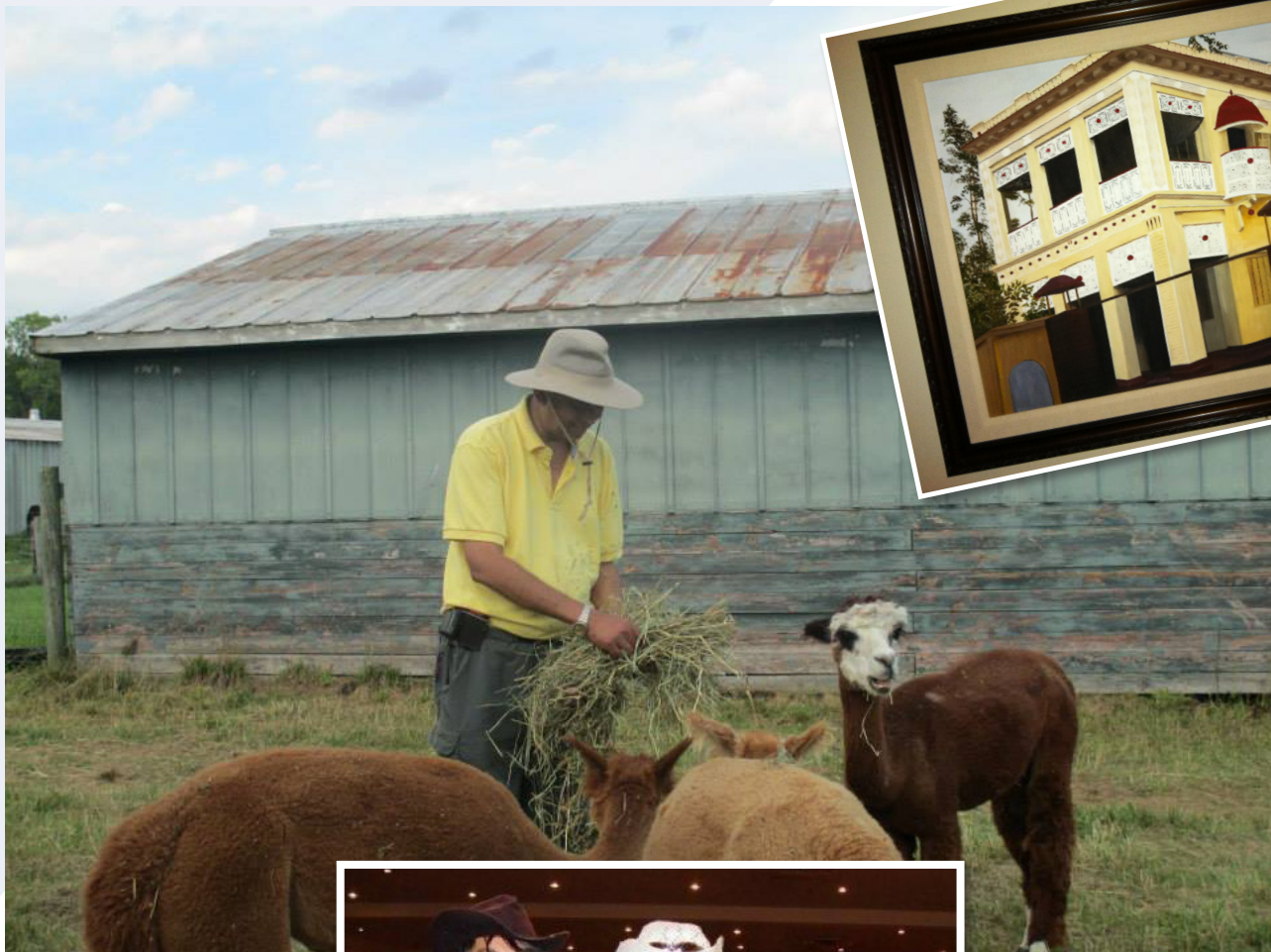
The Ahmed family began rebuilding their life but could not get back into the import business in the same way. The disappointment killed Dr. Ahmed's father within a year. During this time, Dr. Ahmed was a first-year medical student.

After graduation from medical school, he worked in the capital of Bangladesh and did two years of surgical residency. He then went to Algeria to practice in a government clinic for four years. He was recruited to Saudi Arabia, Libya and Iran but political chaos landed him in Algeria.

Dr. Ahmed's wife, Ruqsana

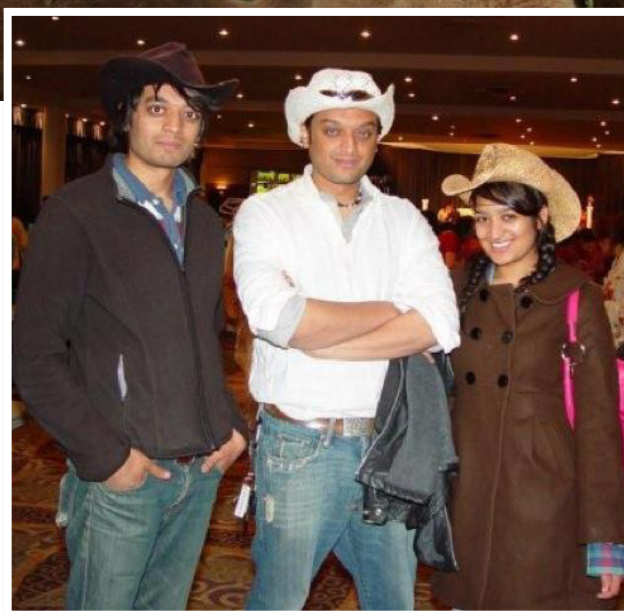
(known to most in the community as Polly), became pregnant while the Ahmeds were living in Algeria. She went back to Bangladesh to stay with his parents and joined Dr. Ahmed eight months later in the United States, where he had begun studying for a Masters in Public Health in Dallas. Dr. Ahmed then switched to a research associate position in a cancer research institute in Dallas for three years. His "big break," as he refers to it, occurred when Dr. Norwood Hill took him under his wing along with a Pakistani oncologist, Dr. Amanullah Khan, helped him get a permanent visa and a residency at Hurley Medical Center in medicine to study with Dr. Robert Rosenbaum.

After his residency, Dr. Ahmed considered an oncology fellowship at Wayne State and the University of California – Davis. Ruqsana was hoping that they would move to California but Dr. Ahmed's



California license took a long time to arrange and, because of the hassle factors associated with it, he decided to stay in Flint. He took a position at Hamilton Family Health Center for six months and then went to Hurley Medical Center as a hospital coverage physician. He then bought a practice from Hurley Medical Center and worked part time at the Emergency Medical Centre on Ballenger Highway and for the county TB clinic. As his practice grew, he merged his practice with that of Dr. Peter Thoms at what is now PMC Beecher Family Medicine and purchased the practice from him. Dr. Thoms still works with him.

Dr. Ahmed noted that he will



always be indebted to Dr. Thoms because, immediately after 9/11, Dr. Ahmed expressed concern to Dr. Thoms that his presence in Dr. Thoms' practice might cause problems for the practice due to prejudice. Dr. Thoms insisted that Dr. Ahmed come in with him and all worked out beautifully.

Dr. Ahmed has worked as an

employed physician and as an independent physician, a government-based physician and an independent practice physician. He understands the issues associated with all factors of the medical community as a result.

One of the most interesting things about walking into his office now is that there is a picture of Jesus immediately inside the door. When asked about it,

Dr. Ahmed says, "Oh that? It will be here forever. I have an accountant who is Jewish and a partner who is Christian. I have friends who are Hindu and enjoy my Muslim life. My patients are of all faiths including leaders of all faiths. As a physician you need to see beyond your faith because your first religion



is humanity. That picture reflects humanity.”

Dr. Ahmed could barely wait to state that he is “blessed to have a talented, loving wife” who has stood beside him in good and in bad times. She has a Bachelor of Science degree in psychology and has taken many computer programming courses. She worked for many years for General Motors in Detroit and Milford as a programmer. The drive was brutal, said Shafi, so now she works in his office carrying out business responsibilities.

Ruqsana was a children’s show host and was involved in TV dramas in Bangladesh before moving to the

United States. Now she is known locally as a singer.

The Ahmeds have three children. Son, Sajeed, is in the real estate business locally. Son, Kaiser, lives in Chicago and has his own theater company. Daughter, Nabila, is an AmeriCorps volunteer working with new immigrants in Chicago.

Dr. Ahmed used to include tennis and cricket as his hobbies, but he doesn’t have time for them anymore. Now his passions include his horse and alpaca farm and on rare occasions playing bridge. He also loves music and is surrounded by it all the time.

Dr. Ahmed noted that he was

brought into the medical society by Dr. Alan Turcke. He enjoys his involvement in this viable and exciting organization. He stated that he speaks about it in all venues. He has served MSMS as the IMG Section Chair. He has served as President of the Michigan Bangladeshi Medical Association of North America and as President of the Islamic Medical Association. He currently serves MSMS as its AMA delegate from the IMG section and is a past Treasurer of the Genesee County Medical Society.

Welcome, Dr. Ahmed, from all of the members of the Genesee County Medical Society.

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GCMS host Genesee County Human Trafficking Task Force



Shafi Ahmed, MD, Jay Kommareddi, Pete Levine with Senator Emmons at Introduction of Human Trafficking legislation

Announcement

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Please join GCMS in welcoming Sherry A. Smith as the new Executive Secretary. Sherry comes from a versatile background of retail sales, visual merchandising, and interior design. She carries a passion for serving others; in her career and in volunteer work through her local church. Sherry looks forward to meeting the new challenges ahead, and to meeting each of you on your next visit to the GCMS offices.

If you or someone you know would like to advertise in *The Bulletin* please contact Sherry Smith at ssmith@gcms.org or (810) 733-9923.

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PRACTICE MANAGERS

HealthPlus and Blue Cross Describe What's New

On September 26, executives from Blue Cross/Blue Shield of Michigan and HealthPlus presented new products relating to health information exchanges as well as actions taken as a result of the Affordable Care Act, and ICD-10. Presenting for Blue Cross was Dan Martin, Director of Provider Outreach. From HealthPlus, Brian Coles, Director of Product Development, presented. In supporting roles were Jennifer Grenell from HealthPlus and B.J. Ayres and Kate Simmons from Blue Cross.

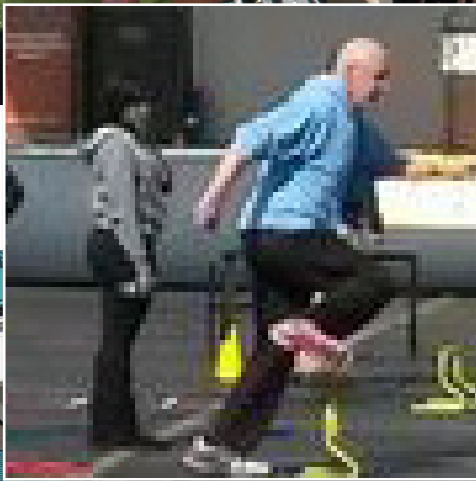
The October practice managers' session will feature a presentation on meaningful use stage II by Dara Barrera of the Michigan State Medical Society.



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OCTOBER 7 LEGISLATIVE LIAISON COMMITTEE

COMMITTEE REINFORCES GCMS/MSMS POSITIONS

The Genesee County Medical Society Legislative Liaison Committee met with Tim Sneller of Rep. Charles Smiley's staff in late September to discuss several pieces of legislation. Mr. Sneller was representing the legislative delegation due to a major scheduling conflict.

The GCMS Legislative Liaison Committee reviewed GCMS and MSMS's grave concerns regarding Senate bills 2 and 180 which have to do with scope of practice. The committee noted that Dr. S. Bobby Mukkamala had been in Lansing the previous Thursday to testify against Senate Bill 180. An extended discussion was held regarding House Bill 4736 entitled, "The Expedited Partner Therapy Bill." This would allow physicians to write prescriptions for the partners of patients diagnosed with chlamydia and gonorrhea without having a doctor-patient relationship. GCMS is very much in favor of this legislation, as is MSMS. The same support is being given to House bills 4404 and 4405, which would raise the age for tanning to 19, and House Bill 4524 which would mandate IDs be worn to identify the profession of health care providers in hospital and major clinic settings.

The committee also noted that there are several human trafficking-related bills which have been introduced in the senate that are of interest to the Genesee County Medical Society.





GCMSA IN LANSING

1) MSMSA Delegation with GCMSA members including: Co-Presidents Vibha Kaushal, Ruqsana Ahmed, Beth Schumacher, and Cheryl Thoms

2) Senator Tonya Schuitmaker Meets with the Delegation

3) Senators Roger Kahn and David Robertson with the delegation

4) Ruqsana Ahmed, Vibha Kaushal and Cheryl Thoms on the senate floor

5) Ruqsana Ahmed at the Podium on the steps of the Capitol

6) Beth Schumacher with son Stephan Schumacher of Senator Robertson's Staff



A COMMITMENT TO AN UNDERSERVED POPULATION

She works with strong principles rooted in the practicality of the work ahead.

By Christopher Adams, MD Candidate 2014

As I traveled to North Carolina, Tennessee, and back to Michigan this summer, I realized that consistency and commitment is critical to relationships in underserved settings. The underserved, just like most people, want doctors that they recognize, remember, and know. This morning, I volunteered at Elmer A. Knopf Learning Center under the mentorship of such a doctor: Laura Carravallah, MD. Along with a handful of other medical students and residents, we performed 400 sports physicals on special needs students for participation in the Special Olympics.

Mentoring students in volunteering is only one of many ways that Dr. Carravallah is a medical leader in Flint. She is a role model to medical students and residents, exhibiting a commitment to the underserved of Flint, Michigan. She dug roots into this community during medical school and has worked in Flint as a doctor for more than two decades, with a medical focus on the underserved.

Dr. "C", as she introduces herself, is originally from Milford, Michigan, a rural blue-collar town southeast of Flint. One of the first of her family to go to college, she went to Michigan State University for undergraduate studies and medical school. She came to the Flint campus for her clinical rotations and soon developed an interest in the population. She felt like the people had "real problems" in Flint. She knew that Flint had grit, but she respected the people and held her judgment of her patients' social ills.

She felt a familiarity here, of her own family and factory workers of her childhood. During her fourth year of medical school, she interviewed across the country, visiting prestigious residency programs in the Midwest,

South, and Northeast. As an AOA member she could have trained anywhere in the country. She decided to stay in Flint at Hurley Medical Center for her residency training. She wanted a place she could sink her teeth into; a place that held opportunities to make a difference.

Dr. C was happy at Hurley where leaders listened about what she would like to see in the program and the community. While they might not agree, they would at least listen, which is all she asked for. After graduating from the combined medicine and pediatrics residency program at Hurley, she decided to re-commit herself to this area, focusing on academic medicine by teaching residents, medical students. She won multiple awards for her teaching in these areas. She currently teaches Medical Ethics to my classmates on a monthly basis. She became president of the Genesee County Medical Society. And the list goes on and on for all that she has done in the community.

To me, Dr. Carravallah holds something very special: the desire and capacity to care for underserved patients with a humility, openness and compassion that is rare. She demonstrates commitment to stay in Flint, despite offers in more comfortable cities. She works with strong principles rooted in the practicality of the work ahead.

As for me, and what my "Flint" will be, I have yet to discover. I am not yet sure which underserved community will be my soil in which to work and grow.

As someone who grew up in multiple places, I am not sure I have "landed" just yet. As I begin the interview trail this autumn, I hope to have a clarity and excitement for where I feel purposed to work and serve. No matter where it is, I hope to exhibit the same sort of humility, passion, and idealism that Dr. Carravallah carries here in Flint.

The Genesee County Medical Society
and the Genesee County Medical Society Alliance
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**SATURDAY
11.09.13**

WARWICK HILLS GOLF AND COUNTRY CLUB
G-9057 S Saginaw Rd
Grand Blanc Township, MI 48439

6:00 PM Cocktail Hour
7:30 PM Dinner followed by Entertainment

Valet parking available | Black tie optional
\$85 per ticket | Cash bar

RSVP Friday, October 25, 2013 to Becky Doty at
bdoty@gcms.org or (810) 733-9923



Meeting the health needs of Genesee County's children

Child & Adolescent Psychiatry (810) 768-7561

- Medication Management
- Psychiatric Consultation
- Behavioral Health Counseling, Screening, Support Groups
- Prevention Activities

Child & Adolescent Health (810) 237-7572

- Pediatrics
- School-Based Clinics
- Audiology
- Nutrition Education
- Teen Wellness Center

Child & Adolescent Dentistry (810) 768-7583

- Dental Exams & Preventive Care
- Dental Treatment & Restorations
- School Screening and Sealant Program
- Infant & Toddler Oral Health Care

Services provided at no cost to low income families

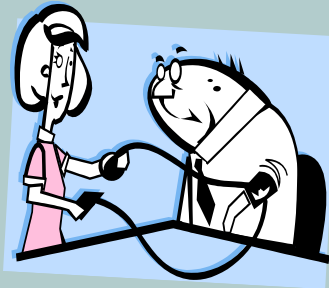
Mott Children's Health Center

806 Tuuri Place • Flint, Michigan 48503 • (810) 767-5750 • fax (810) 768-7511 • www.mottchc.org

**Genesee Health Plan
Presents:
“Learn for the Health of it!”
Expo**

Location:

Flint Southwestern Academy
1420 W 12th St
Flint, MI 48507



Saturday
November 9th,
2013

Hours:
Noon–4pm

**Information and Education on the
Health Care Reform
AND**

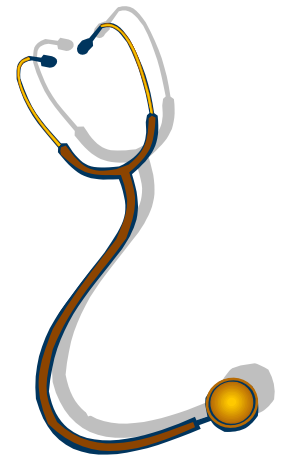
**An opportunity to enroll
Free Flu Shots!
Food Giveaway!
Free Health Screenings!**

Including:

- Blood pressure checks
- Blood sugar checks
- Much more!

“Ask the Doctor” Booth!

“Ask the Pharmacist” Booth!



For any questions or further
information please contact
810-232-7740

ROSTER UPDATE

Please add the following doctors to your 2013/2014 Roster. They were somehow left out of the Roster and we apologize for this oversight.

Legislative Liaison Committee:

Dr. Christopher Sweet

Retired Member:

Dr. Heinz Schwarz
6264 Muirfield
Grand Blanc, MI 48439

Active Members:

Dr. Aftab Aftab,
Pediatrics
10118 N Clio Rd.
Clio, MI 48420
P: (810) 686-7310
F: (810) 686-0988

Dr. Kiran Devisetty
Radiation Oncology
4100 Beecher Rd.
Suite A
Flint, MI 48532
P: 810-342-3813
F: 810-342-3784



Helping over 10,000 Doctors
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or visit
www.scwinc.com



Healthcare Reform Impact



Are you ready for “play or pay” under the health care act? Although it has been postponed until 2015, it is not too early to start considering how the Patient Protection and Affordable Care Act may apply to your practice.

With nearly 80 years of experience serving the medical industry, Lewis & Knopf knows what to listen for when called upon by medical practices. Our goal is to help you handle the upcoming changes with ease and make the moves necessary to ensure your practice stays competitive in today’s transitional market.

**Lewis
& Knopf**
CPAs, PC

Flint
810-238-4617

Fenton
810-629-1500

Brighton
810-225-1808

www.lewis-knopf.com

Healthcare Reform & Me

A Fact Sheet for the Flint & Genesee County Community

Health Insurance Marketplace now open. Learn more now.

Healthcare Reform Law—what does it mean?

- Health insurance is available to everyone. No one can be denied coverage.
- Health insurance can be purchased through the Health Insurance Marketplace.
- Health insurance is affordable to more people at all income levels.
- Health insurance covers a minimum set of medical benefits for everyone.
- The health care reform law requires everyone to have insurance – just like how everyone has to have car insurance – or else they will pay a penalty. There are no exceptions, and it is not free.

What is the Health Insurance Marketplace?

The Marketplace is a new way to find health coverage that fits your budget and meets your needs. With one application, you can see all your options and enroll (similar to websites like Expedia or Travelocity).

Who would use the Marketplace and Why?

- **Those without insurance through an employer, parent or government can buy insurance through the Marketplace.**
- Everyone receives the same information about health insurance options.
- You can access it online, by phone or in person.
- You can compare plans and find what's best for you.

The Marketplace is the only place you can receive the Tax Subsidy help from the government.

How the Marketplace works



1. Create an account

First you will provide some basic information.

2. Apply

As of October 1, 2013, you will enter information about you and your family, including your income, household size, and more.

3. Pick a Plan

Next you will see all the plans and programs you are eligible for and compare them side-by-side.

4. Enroll

Choose a plan that meets your needs and enroll!

Marijuana

Get the FACTS!

The purpose of this document is to address the amendment of the Flint city ordinance to remove penalties for individuals 19 years or older who have less than an ounce of marijuana on private property. The Greater Flint Health Coalition's Mental Health & Substance Use Task Force examined the potential impact that law, as well as the legalization of medical marijuana, has on Flint residents and the effects marijuana use has in the community. The following document examines the consequences that marijuana use has on an individual and the community.

Marijuana Facts

- Marijuana more than doubles a driver's risk of being in an accident.¹
- 15% of trauma patients who were injured while driving their vehicle had been smoking marijuana.²
- Marijuana leads to dependence and is associated with the criteria for substance dependence established by the American Psychiatric Association in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV).³
- A 2002 National Survey on Drug Use and Health, 4.3 million Americans were classified with dependence on or abuse of marijuana.⁴
- More teens enter treatment each year with a primary diagnosis of marijuana dependence than for all other illicit drugs combined.⁵
- Marijuana contains many of the same cancer-causing chemicals found in tobacco.
- The amount of tar inhaled and the amount of carbon monoxide absorbed by those who smoke marijuana is nearly three to five times greater than among tobacco smokers.
- Kids who use marijuana weekly are nearly four times more likely than nonusers to report they engage in violent behavior.⁶

Effects on Health

RESPIRATORY

- Frequent marijuana smokers can have many of the same respiratory problems experienced by tobacco smokers, such as daily cough and phlegm production, more frequent acute chest illness, and a heightened risk of lung infections.
 - People who smoke marijuana frequently but do not smoke tobacco have more health problems and miss more days of work than nonsmokers, mainly because of respiratory illnesses.⁷
- The daily smoking of relatively small amounts of marijuana (3 to 4 joints) has at least a comparable, if not greater effect on the respiratory system than the smoking of more than 20 tobacco cigarettes.⁸

Marijuana as a smoked product has never proven to be medically beneficial and, in reality, is much more likely to harm one's health.

BIRTH EFFECTS

- Marijuana use during pregnancy is associated with increased risk of neurobehavioral problems in babies.
 - Marijuana use by pregnant mothers may alter the developing endocannabinoid system in the brain of the fetus. Consequences for the child may include problems with attention, memory, and problem solving.⁷

CARDIOVASCULAR

- Marijuana raises heart rate by 20-100 percent shortly after smoking; this effect can last up to 3 hours.
 - Marijuana users have a 4.8-fold increase in the risk of heart attack in the first hour after smoking the drug.¹⁰

**This information is provided by the Greater Flint Health Coalition's Mental Health & Substance Use Task Force*



Medical Society Foundation

Consider a donation to the Medical Society Foundation for all of your holiday giving. What a wonderful way of expressing your holiday sentiments while supporting important health related causes.

The Medical Society Foundation has been coordinating physician giving in Genesee County since 1987. This holiday season, why not use the Foundation to make sure your gifts to family, friends and colleagues help to improve the health and well-being of our community.

By giving to the Medical Society Foundation, you receive a great year-end tax benefit at the same time that you tell others how much their health – and the health of those who are most vulnerable in our community – really means to you.

In the past, the Medical Society Foundation funds have been used to support specific public television programs, support of HIV programs, Reach Out and Read, Michigan State Medical Society Alliance, continuing medical education programs, Greater Flint Health Coalition, Turkish Red Crescent Society, Orissa Relief Fund, Sloan Museum's health exhibits, The Genesee County Free Medical Clinic and the Richard A. Rapport Memorial Conference Room.

Contributions can also be made in memory
of an individual or to honor someone.

If you want to designate your gift(s) to a special cause, please indicate your choice on your check. A holiday card will be sent to the person(s) of your choice acknowledging your gift. (We will deduct only 10% from the amount of your check to cover expenses).

Mail your donations to: **Medical Society Foundation**
4438 Oak Bridge Drive, Suite B
Flint, MI 48532-5467

For questions or information on how your gift can help support the charitable activities of your Medical Society Foundation contact Peter A. Levine, MPH at (810) 733-9925 or at plevine@gcms.org.

Medical Society Foundation Mission Statement: The Medical Society Foundation is organized and does operate for the purpose of supporting continuing medical education and health-related charitable activities that further the cause of medicine.

PHYSICIANS MAKE STRONG CASE IN LANSING AGAINST NURSE ANESTHETIST SCOPE EXPANSION

SB 180 testimony of Dr. Bobby Mukkumala

Good afternoon and thank you Chairman Marleau for the opportunity to speak today.

My name is Bobby Mukkumala, I am an otolaryngologist from Flint as well as the Vice Chair of the Michigan State Medical Society. Otolaryngology is the branch of medicine and surgery that specializes in the diagnosis and treatment of disorders of the head and neck. As a surgeon, I am reliant upon my colleagues in the anesthesia department to keep my patients as comfortable as possible, but most importantly I rely on them to keep my patients as safe as possible.

I should acknowledge at the outset that all of the facilities at which I practice utilize CRNAs as well as Board Certified Physician anesthesiologists. CRNAs are highly skilled members of the anesthesia team and are valued by their colleagues in the operating suite and in anesthesia department. Unfortunately, Senate Bill 180 erodes the concept of team by expanding the scope of practice for a single profession without requiring any additional training or education.

Senate Bill 180 seeks to change the definition of nursing to include the administration of anesthesia for those individuals trained as CRNAs. The terminology in the bill sounds very simple and straight forward as if they are simply ordering the anesthetic and then flipping the switch to administer the drug. The reality is much more complex. By the time the anesthetic is administered several important decisions have been made that can impact the outcome for the patient. Is the patient healthy enough for the anesthetic? If the patient has a complex medical history, what plan is in place to manage potential complications? These questions have little to do with the administration of anesthesia, but instead are decisions that are diagnostic in nature. Diagnosis requires a more complex understanding of the patient and is most reliably attained through the additional years of training by a physician.

As a surgeon, I believe it is my obligation to the patient that I accept responsibility for their care while in the operating suite. While I rely on several other people including other doctors, nurses, techs, and many other people for a successful outcome, when it comes to the patient's well-being, the buck ultimately stops here, with me.

We should not sacrifice quality and patient safety for the sake of convenience. The risk of a severe complication to the patient is a very real concern. When reviewing legislation that expands scope of practice, the crucial question needs to be

Doctor Mukkamala (left) with Cmte. member Sen. Dave Robertson (R-Grand Blanc) after the hearing



Continued.

asked is-can the profession in question handle the complications that might arise as a result of their increased scope. As you have heard from others today, there are significant risks to patients and complications that can arise during anesthesia, risks and complications that are best avoided by physician supervision.

As an organization, we are always interested in constructive dialogues to address underlying issues that improve patient care and access. However, we believe that Senate Bill 180 does little to assure improvement related to quality or access. Senate Bill 180 merely legislates independent practice for CRNAs. There are no requirements for additional training. There are no assurances that CRNAs will locate to areas that are underserved by other CRNAs or anesthesiologists.

Senate Bill 180 removes an important safeguard in the Public Health Code that relies on the physician to make the crucial judgment about the medical needs of that patient. The ability to make that judgment is earned through the additional years of training obtained by a physician. Senate Bill 180 takes a one-size-fits-all approach to regulation. Instead of utilizing the education and training of the physician to determine whether a patient may require the additional expertise of an anesthesiologist for a case, we are removing that safeguard in Senate Bill 180.

Senate Bill 180 seeks to confer legislatively rights and responsibilities that have historically been earned via education and training. There are no additional provisions within the bill to address access or assure quality. Granting independence to CRNAs and hoping that access improves and safety is not negatively impacted is not a comprehensive plan for addressing health care in Michigan. MSMS is therefore opposed to Senate Bill 180.

The *Genesee County Medical Society*
and the *Genesee County Medical Society Alliance*
Cordially invite you to the

PRESIDENTS' BALL

**SOPRANOS
STYLE**

**SATURDAY
11.09.13**

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Grand Blanc Township, MI 48439

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Valet parking available | Black tie optional
\$85 per ticket | Cash bar

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bdoty@gcms.org or (810) 733-9923



Genesee County Medical Society

Board of Directors Meeting

September 24, 2013 - MINUTES

Khalid Ahmed, MD
* Shafi Ahmed, MD
Qazi Azher, MD
Amitabha Banerjee, MD
Jagdish Bhagat, MD
* Cathy Blight, MD
* Laura Carravallah, MD
* Edward Christy, MD
Pino Colone, MD
* Niketa Dani, MD
* Deborah Duncan, MD
Hesham Gayar, MD
Mona Hardas, MD
* John Hebert, III, MD
F. Michael Jaggi, DO
* Rima Jibaly, MD

* Gary Johnson, MD
Farhan Khan, MD
Samasandrapalya Kiran, MD
Nita Kulkarni, MD
* Paul Lazar, MD
Sreenivas Mannam, MD
AppaRao Mukkamala, MD
S. Bobby Mukkamala, MD
Gerald Natzke, Jr., DO
* Venkat Rao, MD
Lawrence Reynolds, MD
Brenda Rogers-Grays, DO
* Raymond Rudoni, MD
Dan Ryan, MD
Jagdish Shah, MD
Jawad Shah, MD

Robert Soderstrom, MD
Kenneth Steibel, MD
* Peter Thoms, MD
Venu Vadlamudi, MD
*Tarik Wasfie, MD
*John Waters, MD

Guests & Staff:

*Jonathan Hartman – CC&G
*Peter Levine, Staff
*Nick Bendall, Staff
*Dr. Esther Kise
* Dr. Mustaq

**In attendance*

I. Call to Order:

The meeting was called to order at 6 pm in the Rapport Conference Room by Raymond Rudoni, M.D., President

II. Introduction of Guests:

Dr. Rudoni introduced Drs. Kise and Mustaq who are second year pediatric residents.

Motion: That in advance of the next meeting, everyone is asked to invite non-members and members of the Osteopathic Association to the Ball.

II. Review of Minutes:

Motion: That the Board of Directors meeting minutes of August 27, 2013 be approved as presented.

The Motion Carried.

III. Reports:

A). Alliance Report:

Pete Levine provided an update on alliance Activities, noting that the co-presidents are at a “Day at the Capital” with other Alliance representatives.

B) Finance Committee Report:

Budget-to-Actual report for the period ending August 31, 2013.

Motion: That the Budget-to-Actual report for the period ending August 31, 2013, be approved as presented.

The Motion Carried.

Continued.

C) Commit to Fit final grant report:

Pete Levine provided a report on what Nick Bendall has been able to accomplish with the “Commit to Fit” interventions at physicians’ offices. Dr. Rudoni noted that Mr. Bendall has done an outstanding job and represented GCMS very well. He has been terrific.

Motion: That Nick Bendall be made aware of the Board of Directors appreciation of his efforts on the “Commit to Fit” program. The Motion Carried.

D) Community and Environmental Health Committee Report:

In discussion of the GMO materials, it was noted that references and citations are needed in order to understand the etiology of the information.

D) Legislative Update:

Dr. Cathy Blight reported that scope-of-practice legislation is coming up very quickly and noted that physicians are needed to testify against it.

Dr. Blight also reported that liability reform legislation is coming up, especially related to the MTALA bill. 110 emergency physicians went to Lansing in support of this bill during the previous week. She also reported that Medicaid expansion passed and has been signed by the governor with deferred implementation until April 1, 2014.

F) Greater Flint Health Coalition Update:

Dr. John Waters and Pete Levine presented a revised marijuana statement from the Pharmacy Task Force of the Greater Flint Health Coalition. The statement had been revised in substantial ways based on last month’s Board recommendations.

Motion: That the revised marijuana statement from the Greater Flint Health Coalition be endorsed by the Genesee County Medical Society with a few suggested wording changes. The Motion Carried.

The same two individuals introduced the input of the health coalition on the City of Flint’s master plan. Following substantial discussion, the following motion was presented:

Motion: That the Genesee County Medical Society approve the input of the Greater Flint Health Coalition on the city of Flint’s master plan. The Motion Carried.

Health Coalition annual meeting will be held on October 10. The presenter will be Marianne Udow, Director of the University of Michigan Center for Health Care Transformation.

G) District Director’s Report:

Dr. John Waters reported that the health insurance exchanges are taking up a lot of people’s time and attention. He also noted that the Annual Scientific Meeting is next month.

H) President’s Report:

Dr. Ray Rudoni reported that the Talent Show was a wonderful experience for all who attended. He encouraged all to come to the ball on November 9, 2013.

Dr. Rudoni reported that GCMS has been hosting a human trafficking task force which is made up of the FBI, the Prosecutor’s office, several social agencies, the Medical Society and some members of the public. This is gaining a tremendous amount of traction in Genesee County and statewide. He noted that Dr. Shafi Ahmed and Pete Levine would be attending a press conference in Lansing resolving around bills that are being introduced to impact human trafficking.

Dr. Rudoni also reported that the GCMS practice manager's meeting would be held on Thursday and revolve around what's new with Blue Cross and HealthPlus.

IV. New Business:

1. Osteopathic physicians

Dr. Peter Thoms proposed that all Osteopathic physicians be invited by Board members to all of our meetings including the Ball.

Motion: That Board members invite nonmembers who are Osteopathic physicians to all general membership meetings, our Ball, and Board of Directors meetings. The Motion Carried.

2. Caring for the deaf

Because Beth Schumacher and Feroza Raffee were in Lansing with the "Day at the Capital" program, the caring-for-the-deaf issue will be deferred until the next board meeting.

V. Next Meeting:

Dr. Rudoni reminded everyone that the next meeting of the Board will take place on October 22 and will revolve around membership issues and passage of a budget.

VI. Adjournment:

No further business appearing, the meeting was adjourned at 7:10 p.m.

PHYSICIANS NEEDED AT THE EMERGENCY MEDICAL CENTER OF FLINT

Various shifts are available for part-time.

Full time may be an opportunity as well.

Must be willing to do minor stitches, infants & children, splinting,
and minor eye & ear procedures.

This is a classic urgent care, much like family practice.

Hours of operation:

12-9 pm, 7 days a week, closed on major holidays

Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503.

Contact Joyce Ash at 810-232-2710 or Pete Levine at 810-733-9925.

YOUR \$\$\$ AT WORK

- S** GCMS presented a practice manager's session on what's new with Blue Cross and HealthPlus in the face of the Affordable Care Act.
- S** GCMS arranged speakers for physician meetings as requested on the Affordable Care Act.
- S** GCMS worked with several physicians' offices on office practice-related problems.
- S** GCMS Board of Directors approved a marijuana fact paper derived from the Pharmacy Task Force of the Greater Flint Health Coalition.
- S** GCMS provided input to the City of Flint on its master plan.
- S** GCMS provided testimony in opposition to Senate Bill 180 which would change scope of practice issues for CRNAs.
- S** GCMS was represented at a press conference on the capitol steps regarding legislation that would block human trafficking in the State of Michigan.

GCMS MEETINGS

– NOVEMBER 2013 –

11/4 – 8 a.m. Legislative Liaison Committee @ GCMS

11/6 – 7:30 a.m. Bulletin Committee @ GCMS

11/26 – 5:15 p.m. Finance Committee @ GCMS

11/26 – 6 p.m. GCMS Board of Directors @ GCMS

11/27 – 12:30 p.m. Community & Environmental Health Committee @ GCMS

Recessed – 8 a.m. Practice Managers @ GCMS

SAVE THE DATE!
Presidents' Ball
11/9/13

HAPPY BIRTHDAY DOCTOR

NOVEMBER

| | | | | | |
|--------------------|----|-------------------------|----|-----------------------|----|
| Gerald Berner | 1 | Ranjan Monga | 12 | Alan Goldberg | 22 |
| Tahera Azharuddin | 1 | Barbara Mercer | 14 | Mark Trudell | 22 |
| Carlton Dettman | 2 | Lynn Walker-Payne | 14 | Cecilia Lopez | 22 |
| Rosie Lumaque | 2 | Phyllis Helcher | 15 | Heinz Schwarz | 23 |
| Pacita Li Tanhehco | 2 | Nikhil Vora | 15 | J Bernard Sloan | 23 |
| Yong Seup Chung | 2 | Peter Stoyanoff | 15 | John Frederick | 23 |
| Michael Zarr | 2 | David Ojeda | 16 | Myriam Edwards-Miller | 23 |
| Sania Zainuddin | 3 | Gerald Natzke Jr | 16 | John McIllduff | 24 |
| Punam Sharman | 4 | Manulal Lala | 17 | Aram Minasian | 24 |
| Manmeet Dhillon | 4 | Mona Hardas | 17 | Mostafa Abuzeid | 25 |
| Ayman Haidar | 5 | Shady Megala | 17 | Daniel Anbe | 26 |
| Jolanta Sobotka- | | Vishwas Vaniawala | 18 | Linda Hotchkiss | 26 |
| Czarnecki | 6 | Brenda Rogers-Grays | 19 | Robert Joynt | 27 |
| JD Wheeler | 7 | Michael Macksood | 19 | Stephen Wang | 27 |
| Maurice Robitaille | 9 | Jamal Farhan | 19 | Gurkan Ege | 27 |
| Daniel Walter | 9 | A. George Dass | 19 | Ali Mohammed | 28 |
| Minoo Chinoy | 9 | Sara Margaret Pendleton | 19 | Alan Hartz | 29 |
| James Culver | 10 | Dennis Pank | 20 | K V Mathew | 30 |

CLASSIFIEDS

OFFICE SPACE AVAILABLE

Small office located by front door of Genesee County Medical Society suite. Great exposure for businesses seeking visibility with physicians. Conference room availability possible. Office size 100 sq. ft. at \$12 per sq. ft. triple-net. Additional office space available. Contact Pete Levine at (810) 733-9925 for details.

PHYSICIANS NEEDED

at the Emergency Medical Center of Flint Various shifts available for part-time, as well. Must be willing to do minor stitches, infants & children, splinting, and minor eye & ear procedures. This is a classic urgent care much like family practice. Hours of operation 9:30am – 9pm, 7 days a week, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503. Contact Pete Levine at 810-733-9925.

URGENT CARE PHYSICIAN NEEDED

An established group in Ann Arbor, Michigan is adding another UC physician. Family Practice; BC required. Rotating days and evening schedule; alternating weekends. Strong salary and benefits. Contact Bud Setzer 800-268-4057 or bsetzer@practiceamerica.com

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7:30 PM Dinner followed by Entertainment

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\$85 per ticket | Cash bar

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bdoty@gcms.org or (810) 733-9923



WHERE DOES THE MONEY GO?

- The Fund for Better Health provides grants to support community - based public health service projects in areas such as substance abuse prevention, violence prevention and healthy lifestyles.
- The Development Fund is an unrestricted fund that allows the AMA Foundation to respond quickly to issues as they arise or provide support in areas of greatest need.
- The Scholars Fund distributes approximately \$500,000 annually in tuition assistance to medical students across the country. Gifts to this fund can be designated to specific U.S. medical schools.

GENESEE COUNTY MEDICAL SOCIETY ALLIANCE

• AMA Foundation Holiday Greeting 2013 •

Contributor(s) _____

Amount of Contribution \$ _____

Address _____

DESIGNATED FUND:

Scholars Fund _____

(Medical School Name, City, State)

Fund for Better Health _____

Development Fund _____

Mail your completed form, along with check payable to The AMA Foundation,
to Kee Ja Kang, 8511 Hidden Forest Court, Grand Blanc, MI 48439.

For questions or more information, please call Kee at (810) 603-1020.



**MICHIGAN STATE
MEDICAL SOCIETY**
120 W. Saginaw, Lansing, MI 48823
msms@msms.org • www.msms.org
517-336-5762

**State and County Medical Society
Membership Application**

**GENESEE COUNTY
MEDICAL SOCIETY**
4438 Oak Bridge Dr., Suite B
Flint, MI 48532
810-733-9923



Please PRINT or TYPE

FULL NAME _____ MD or DO (Circle One)
Last First Middle Initial

HOME ADDRESS, CITY & ZIP _____
Area Code & Telephone Number

OFFICE ADDRESS, CITY & ZIP _____
Area Code & Telephone Number

PRACTICE NAME _____
Office Fax Number

EMAIL ADDRESS _____ For mailing, please use (check one): Office address Home address

BIOGRAPHICAL DATA Sex: Male Female Birth Place _____ Date of Birth _____
Month Day Year

Maiden Name _____ Spouse's Name _____

Languages Spoken _____

Government Service (check one): Military National Health Service Beginning Date _____ Completion Date _____

EDUCATION (please complete or attach CV)

| INSTITUTION | LOCATION | DEGREE | YEAR GRADUATED | |
|--------------------------|----------|--------|----------------|--------|
| | | | Beginning | Ending |
| College/University _____ | _____ | _____ | _____ | _____ |
| Medical School _____ | _____ | _____ | _____ | _____ |

| INTERNSHIP, RESIDENCY, AND FELLOWSHIPS | SPECIALTY | COMPLETION DATE |
|--|-----------|-----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

License: MI # _____ Date Issued _____ ECFMG # _____

License held in other states/countries (list states or countries) _____

PROFESSIONAL DATA

Present Type of Practice (check appropriately):

OFFICE BASED: Solo Hospital Based Teaching Research Government
 Group Practice Name _____ Other (specify) _____

Specialty(ies) _____

Board Certifications (list specialties & dates) _____

Present Hospital Appointments (list dates) _____

Practice History _____

Previous Medical Society Membership (list dates) _____

Specialty Society Memberships _____

Within the last five years, have you been convicted of a felony crime?..... Yes No If YES, please provide full information.

Within the last five years, has your license to practice medicine in any jurisdiction been limited, suspended or revoked?..... Yes No If YES, please provide full information.

Within the last five years, have you been the subject of any disciplinary action by any medical society or hospital staff?..... Yes No If YES, please provide full information.

I agree to support the GENESEE COUNTY MEDICAL SOCIETY Constitution and Bylaws, the MICHIGAN STATE MEDICAL SOCIETY Constitution and Bylaws, and the Principles of Ethics of the American Medical Association as applied by the AMA and the MSMS Judicial Commission.

Signature _____ Date _____

WHEN COMPLETED, please mail to MSMS or Genesee County Medical Society, or FAX to 517-336-5797. THANK YOU!

