

THE Bulletin



AUGUST 2013 Volume 90, Number 8

**GCMS and MSMS Meet with Governor
and Lt. Governor on Medicaid**

Part III Community Data from GFHC

2013-14 Slate of Officer Nominees

What is Crossfit

Reserve for Talent Show

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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

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GCMS AND GOVERNOR SNYDER – ‘EXPAND MEDICAID’!

GCMS has been very busy of late doing its part in support of Governor Rick Snyder's efforts to expand Michigan Medicaid. House Bill 4714 is in the hands of the Republican Senate and unfortunately remains in limbo.

Early in July, GCMS members turned out in great numbers to show their support for the governor's decision to support Medicaid Expansion by attending a Town Hall Meeting in Genesee County. The governor and several members of our community, lead a discussion of how this decision would help citizens, small businesses and both the medical and hospital communities.

Understanding the political challenges that our Republican governor has with convincing the Republican-controlled Senate to vote on expanding Medicaid, GCMS thought it was important to speak with our local state senator, Dave Robertson. Dr. Shafi Ahmed, Beth Schumacher and I spent an hour with Senator Robertson in hopes of convincing him to change his position from opposition to support of expansion.

With supporting data and specific talking points prepared by our colleague Steve Japinga from MSMS, the three of



Ray Rudoni, MD

us did our best to reiterate with Senator Robertson, not only the importance of supporting Medicaid Expansion, but the downstream negative impact to patients, the small business community, doctors and hospitals, if they do not support it.

At the end of the meeting, I suspect we agreed to disagree, however, I believe the small group did an outstanding job of reiterating just how important this bill is to our state and to our local community.

I wanted to thank Pete Levine, MSMS staff and all the Society and Alliance members who contributed to this important grass-roots effort. This is

a perfect example of the work being done by many in our community designed to improve the lives and well being of our patients. Thank you everyone. It is an honor and privilege to serve with each of you.

HURLEY MEDICAL CENTER PEDIATRIC ONCOLOGY UNIT

Coordinated Care, Close to Home

KH was a 12-year-old girl living in Ontario, Canada with her father. Her parents were divorced and her mother moved to Pinconning, Michigan. KH was diagnosed with cerebellar Medulloblastoma in 2011. She received her brain radiation at Victoria Children's Hospital and needed to start chemotherapy. It was agreed that her mother in Michigan could provide the most supportive care throughout her treatment so KH moved to Pinconning. She was registered on the Children's Oncology Group (COG) Protocol and that is how she came to be treated at Hurley Medical Center and counseled periodically by a child psychologist. KH received the same level of quality care much closer to her new home.

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WHEN IN DOUBT, SIT THEM OUT

*The brain, my second favorite organ.
Woody Allen (1935-)*

July flies away and as the calendar page flips over to August we realize that besides beaches, boating, ball games, and the bountiful harvest of summer, it is time once again for that mid-summer ritual – the start of football practice. Peewees, high-schoolers, collegians, and professionals are all back on the field, in the summer heat and humidity, vying to be the champions at their respective levels of competition. Along with the two-a-day drills, attention should be turned to the risks associated with tackle football, and one of the most common and potentially serious injuries sustained is concussion. Of course, concussion is not unique to tackle football but the inherent violent contact, despite padded protective equipment, that is an essential aspect of the game, puts players at risk for head trauma.

The word concussion is derived from the Latin word “concutere” which means to shake violently. Estimates are as high as 3.8 million incidences of concussion each year in the United States. from sports and recreational activities. Children are at higher risk because of their relatively large head size and weaker neck musculature compared to adolescents and adults. After a significant blow to the head, or any sudden deceleration of the brain, such as in a vehicle wreck, the soft and squishy brain tissue slams against the inside walls of the cranial vault resulting in damage to blood vessels, brain parenchyma, and connective tissue, leading to changes in normal brain chemistry and function. Typical symptoms include headache, difficulty with short-term memory, concentration, balance, co-ordination, and judgment. Other sequelae include sleep disturbances, abnormal light and sound sensitivity, irritability and even mood and personality changes. Symptoms may last a few hours or persist for weeks and months.



Daniel Ryan, MD

A study from the National Center for Injury Prevention found that 47% of high school football players say that they suffered a concussion during a typical season, with 37% reporting multiple concussions. However, 85% of concussions go undetected. When a concussion is diagnosed, 40% of players are allowed back on the field to play too soon after the injury. The American Academy of Neurology recommends that if an athlete’s symptoms following a head injury, such as dizziness or nausea, last more than 15 minutes, they should be benched until they are symptom free for at least one week.

Guidelines to prevent long-term consequences of concussion include having people on the field such as coaches, trainers, and other staff who understand and are trained to recognize the signs and symptoms of concussion. A physician present at games is even more helpful. Standardized tests to determine a player’s fitness to return to action such as the Immediate Post-Concussion Assessment and Cognitive Test (ImPACT) can measure attention span, memory, reaction time and non-verbal problem solving aptitudes. Graduated programs for resuming play and long-term monitoring of a players progress after a concussion are essential for protecting athletes.

Concussion will always be a part of the risk of contact sports, despite the delusion that many young athletes have about their invulnerability. In the not-so-distant past, concussion was considered a minor injury but research has shown that this is far from accurate. Concussion is a serious brain injury with immediate, short-term, and long-term consequences for the damaged brain. Improved equipment, rules changes, and educated players, coaches, and trainers can minimize the danger to athletes at all levels of play.



Practice Managers Meet on Security Risk Assessment

In late June, the practice managers group met to hear a presentation by Beth Heft, Clinical Applications Coordinator for the Michigan Peer Review Organization, on “Understanding meaningful use measure 15; the required elements of security risk assessment.”

This was a particularly interesting meeting which was requested specifically by the practice managers. Future meeting topics will be distributed as they become available.

PRACTICE MANAGERS MEETING

DATE: August 22, 2013

TIME: 8-10 AM

PLACE: GCMS offices in the Rapport Conference Room

Topic: What is new With the Blues?????

Meet and Greet and Hear from Dan Martin, New Director of Provider Outreach, Blue Cross Blue Shield of Michigan.

Take advantage of this opportunity to interact with Mr. Martin and Tina Gach, Provider Consultant for BCBSM.

As we approach the major changes brought by the Affordable Care Act, ICD10, Insurance Exchanges and everything else, this is another opportunity to meet and interact with individuals who will be key in the implementation processes.

PLEASE RSVP EARLY AS SPACE IS LIMITED!

Please email your RSVP to: bdoty@gcms.org.

MORE COUNTY DATA, AND MEDICAID EXPANSION STILL HANGS IN THE BALANCE

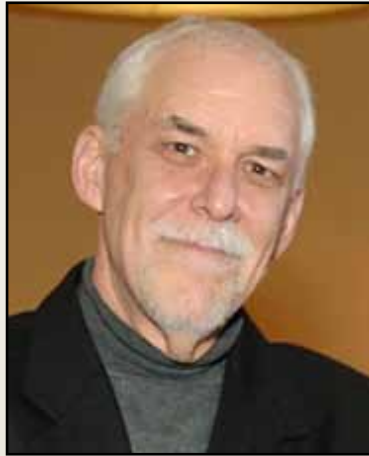
This summer will be remembered as the summer of the Medicaid Expansion debate, and legislative initiatives on scope-of-practice expansion for nurses. The sad thing is that the pawns in this game are people, both uninsured and potentially insured patients, and the doctors who are trying to keep them healthy.

According to information recently received from MSMS, all 83 counties in Michigan would be directly impacted by the decision to pass a bill that would expand Medicaid eligibility to 474,000 people statewide. In Genesee County alone, there would be an extra 18,422 people eligible for Medicaid under this plan in House Bill 4714. It is projected that passage of this legislation would save Michigan taxpayers \$200 million per year in reduced health care spending in the state budget.

This issue of *The Bulletin* is rife with information which can be helpful to you. We have the third in our ongoing segment on county health rankings and demographic information. This is information compiled by the Greater Flint Health Coalition, using myriad data sources.

In addition, this issue contains an article on a new exercise program called CrossFit that my son Evan and I are participating in along with several local medical families. It's fun and just one of the many ways to work on fitness. We are including an article about it simply because it might inspire someone to get started on the fitness track.

In addition, this issue contains information from our ongoing "Commit to Fit" initiative, held in conjunction



Peter Levine, MPH

with the Greater Flint Health Coalition. Nick Bendall of our staff stands ready to come to your office, at your convenience, to talk about ways that "Commit to Fit" concepts and materials can help improve outcomes in your patient population.

We have recently sent out solicitations for contributions to the Society. We have not had a dues increase since the late 1980s, and your contributions will be greatly appreciated, in an effort to avoid future dues increases.

In addition, any help that you can provide encouraging non-members to join the Society would be greatly appreciated.

This organization has proven its value for years on end and has done so without increased cost to members. The recent liability reforms which passed in Michigan cover full-time dues in spades. The doctor tax, which was fought so diligently, covers dues for every \$33,000 in gross receipts which a practice receives.

Please also remember that the Medical Society Foundation stands ready to receive contributions. It supports the charitable activities of the Society, providing staff support to the Genesee County Free Medical Clinic, the Greater Flint Health Coalition and the Genesee Health Plan.

I hope people are enjoying having Marcia Gzym back helping remotely from Grand Rapids on a temporary basis. Her enthusiasm and general attention to detail are so greatly appreciated. We thank her for stepping in during Becky's pregnancy and period of adjustment to motherhood.



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GCMS MEETINGS

– AUGUST 2013 –

- 8/5 – 8 a.m. Legislative Liaison Committee @ GCMS
- 8/7 – 7:30 a.m. Bulletin Committee @ GCMS
- 8/27 – 5:15 p.m. Finance Committee @ GCMS
- 8/27 – 6 p.m. GCMS Board of Directors @ GCMS
- 8/28 – 12:30 p.m. Community & Environmental Health Committee @ GCMS
- 8/22 – 8 a.m. Practice Managers @ GCMS

SAVE THE DATES!
Talent Show and Dinner
Business Meeting 9/6/13
Presidents' Ball
11/9/13

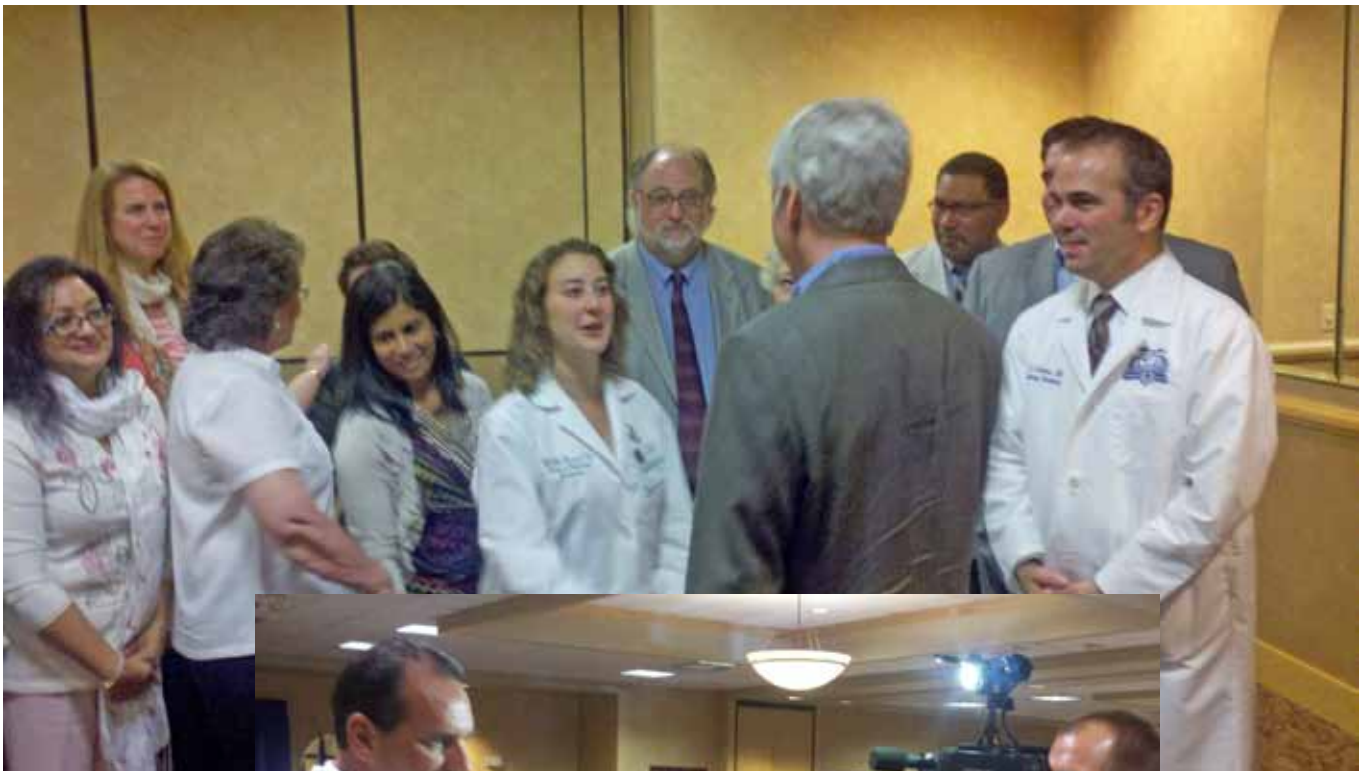
CONVERSATION WITH THE GOVERNOR AND LT. GOVERNOR ON MEDICAID

On June 27, a Genesee County Medical Society delegation participated in “A Conversation with the Governor” regarding Medicaid Expansion. The meeting was held at Genesys Athletic and Conference Center. In addition to the governor, the lieutenant governor was also present. The purpose of the meeting was to encourage members of the state Senate who have been opposing Medicaid Expansion to reconsider and get the expansion completed. This was the fourth of four “Conversations with the Governor” held around the state, and by far the largest.

Present were Dr. Lawrence Reynolds, past president of the Michigan Academy of Pediatrics and the Genesee County Medical Society; Vebha Kaushal and Ruqsana Ahmed, co-presidents of the Genesee County Medical Society Alliance; Paul Lazar, MD from the Genesee County Medical Society board and a residency program faculty member; Andrew Duda, MD a residency program faculty member; Traci Kim, practice manager for Complete Eye Care; Cheryl Thoms, past president of the GCMS Alliance; Amanda Winston, MD, a brand new resident in the Hurley Med-Peds Program; Ali Anari, MD, a pediatric resident; Cathy Blight, MD, past GCMS and MSMS president; Raymond Rudoni, MD, GCMS President and past president of Michigan College of Emergency Physicians and MSMS Vice Speaker; Pino Colone, MD, MSMS Speaker; Susan Soderstrom, member of Genesee County Medical Society Alliance and Mayor of Grand Blanc; Pete Levine, MPH, GCMS Executive Director; Sarah Pendleton, MD Chief of Pediatric Residency at Genesys; Steve Japinga and Colin Ford of Michigan State Medical Society staff.

Later in the month, GCMS President, Raymond Rudoni, MD and President Elect Shafi Ahmed, and Alliance member Beth Schumacher also held a meeting with Senator David Robertson on the issue of Medicaid expansion.





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- 3 Restrooms
- Break Room
- Lab Room
- 1 General Office
- X-Ray Area



Contact: James Wascha or
Renee Waswick (810) 695-6153

e-mail: jw@waschalaw.com
or rwaswick@comcast.net

Announcement

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Becky Doty at
bdoty@gcms.org or
810-733-9923.

Thank you.

Legislative Malpractice: Political Football at the Expense of the People

By Peter Levine, M.P.H.

As we speak, Senate Bill 2 has been passed out of its Senate Committee and is on the floor of the Senate for a vote. Senate Bill 2 is particularly odious, because it would allow advanced practice nurses to practice independently of physicians. The legislature does not seem to understand that there is a reason why medical school, residencies and fellowships take so long and why physicians need to be the team leaders in health care. They are simply the most highly trained professionals. While policy makers and medical leaders bemoan the coming dearth of physicians in Michigan, the state legislature is sending every bad message to prospective physician recruits about why not to practice in the state of Michigan. Put another way, while the health care leadership is doing everything it can to recruit physicians, the irrational behavior by the legislature continues.

Let's look first at the legislature's behavior with respect to the insurance exchange which leaves me worried about the decisions the legislature will make with respect to Medicaid expansion/reform. The legislature felt it wiser to not vote for a state based exchange that would have triggered a \$63 million grant from the Federal government, and instead by not acting have defaulted to the Feds for our exchange which will now cost the state \$8 million in order to comply. At one point, it looked like the Medicaid program might be expanded. That prospect looks grim despite the continued efforts of dedicated supporters. Recent events do not diminish the perception that the legislature is needlessly grappling with what is a slam dunk from a policy perspective. One thing we don't need in this community is more uncompensated care.

So, now we have problems with expansion of Medicaid, abandonment of a federally funded insurance exchange and a declaration that the extra years of medical school and residency are of no value in the eyes of the legislature. Then let's add to this the additional potential diminution of the no-fault auto laws in the state of Michigan, which would cap the auto accident health care coverage at \$1 million. For those who are experienced with this, they know that \$1 million for some accidents can be a small percentage of the cost. From an insurance company's perspective, this is wonderful. From a patient's perspective, this is catastrophic. Finally, there are the endless threats of cuts to graduate medical education. While we are constantly being told by legislators that they are very concerned about the fact that we are facing a crisis of physician supply, especially in communities like Flint, the governor and the House proposed cuts to GME funding. Fortunately the Senate restored the cuts. This cycle needs to stop. Students will not stay here as residents (which makes them more likely to stay on as attending physicians) if they think funding for their programs may be cut in mid program.

So what is the overall message that our legislature is giving? You diminish the value of the physician education via inappropriate scope of practice expansion. You make it so that we can graduate lots more medical students than we could a few years ago, but have done nothing to increase residency program slots so recent graduates are forced to leave the state for residency programs. You put physicians more at risk for caring for uninsured patients by possibly not expanding the Medicaid program and you cap auto insurance, which damages substantially a large number of patients and the physicians who treat them.

My question to the legislature is, other than the fact that this is a beautiful state, what are you doing to help attract physicians here?

To a non-professional observer, the political process has gotten so nasty and appears to have more to do with positioning for re-election than with productive activity. All of this is true. I hear it every day from residents and students.

But the one message I would like to send to the health care community is that there are many legislators who are working hard on behalf of health care providers and Michigan's citizens. This session of frustration was preceded by major legislative victories last year. Also, one of the amazing things about politics is rarely are defeats final.

Pete Levine is the longtime executive director of the Genesee County Medical Society and an acknowledged health policy maven.

REMEMBERING...



JOSE A. FERNANDEZ, MD

A popular pediatrician who devoted his entire career to caring for children in the Flint, Michigan area, died at home on May 16. Dr. Fernandez practiced here for 29 years.

Born in Ciudad Trujillo, Dominican Republic, on July 20, 1929. He completed grade school in Puerto Rico and high school in Cuba. He then moved to Chicago where he married Maria Quevedo in 1952. He served in Germany in the United States Army 1951-1953.

Returning to Chicago, he graduated from Roosevelt University with a pre-med degree in biology. He then completed medical school at Universidad de Nuevo Leon in Monterey, Mexico. Following an internship at Mercy Hospital in Toledo, he came to Flint in 1963 to complete a residency in pediatrics at Hurley Medical Center. He established a solo pediatrics practice here in 1965. Dr. Amitabha Banerjee joined him as a partner in 1976, and their practice joined Blue Care Network in 1983.

Dr. Fernandez taught pediatric and medical residents at Hurley Medical Center, and medical students from Michigan State University (MSU) where he served as a Clinical Professor in Pediatrics for the College of Human Medicine. He served on numerous hospital and university committees, and he received the Best Teacher Award.

Retirement in 1994 left Dr. Fernandez with more time for his hobbies of gardening, vegetarian cooking and enjoying his grandchildren.



DR. PRADYUMNA KUPER

Pradyumna Kuver, MD, passed away on May 11, 2013 at age 83. He was a graduate of the Fiji School of Medicine and Calcutta Medical College. Dr. Kuver was born on September 16, 1929 in Fiji. He was in private practice in Fiji from 1957-1971. He moved to Flint to complete an Internal Medicine Residency at McLaren General Hospital in 1972-1975. He then established a practice in Internal Medicine which he continued until his retirement 10 years ago. Dr. Kuver had been a member of the Genesee County Medical Society since 1974. Dr. Kuver was the husband of Bhan Mati Kuver of Flint.

The Following SLATE OF NOMINEES FOR GCMS OFFICES 2013-2014 was presented to the Board of Directors on June 25 for approval and is published for members' review in the August Bulletin:

PRESIDENT-ELECT: Debra Duncan, MD

SECRETARY: Qazi Azher, MD

TREASURER: Edward Christy, MD

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Shafi Ahmed, MD	Laura Carravallah, MD
Mona Hardas, MD	Paul Lazar, MD
Raymond Rudoni, MD	Tarik Wasfie, MD
Gerald Natzke, DO	

ALTERNATE DELETATES:

Athar Baij, MD	Niketa Dani, MD	Andrew Duda, MD
Asif Ishaque, MD	F. Michael Jaggi, DO	Rima Jibaly, MD
Farhan Khan, MD	S. Kiran, MD	Nita Kulkarni, MD
Brenda Rogers-Grays, MD	Robert Soderstrom, MD	Peter Thoms, MD
Venu Vadlamudi, MD	Amanda Winston, MD	

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Deborah Duncan, MD	Lawrence Reynolds, MD	John Waters, MD
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Anjali Misra, MD

PRESIDENT FOR A DAY:

Amitabha Banerjee, MD

MSMS COMMUNITY SERVICE AWARD:

Mohamed Saleem, MD

GFHC COMMUNITY DATA SCORECARD REPORT

DEAR READERS,

The Editorial Board of the Bulletin would like to continue to provide a series of charts which were developed by the Greater Flint Health Coalition showing the data trends and projected community health issues for Genesee County. The data is amassed from myriad local, state and national sources and is a first rate compendium. Rather than overwhelm you with material, we will provide it in logical sections. In the April issue we provided several charts from the “Environmental Findings to Acknowledge as Factors Influencing Health.” In the May issue we covered the Major Healthcare Access and Cost Trends. This month we feature information on Major Health Status Trends.

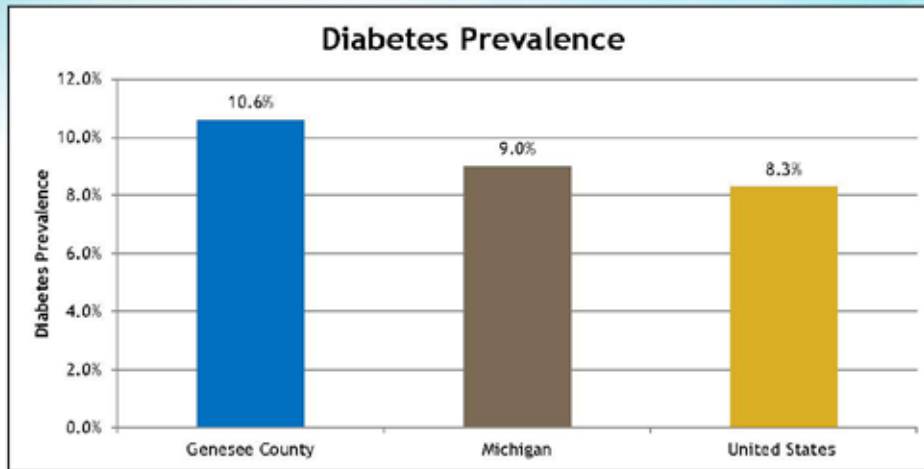
Daniel Ryan, MD, Editor

GFHC Community Data Scorecard

Major Health Status Trends



DIABETES



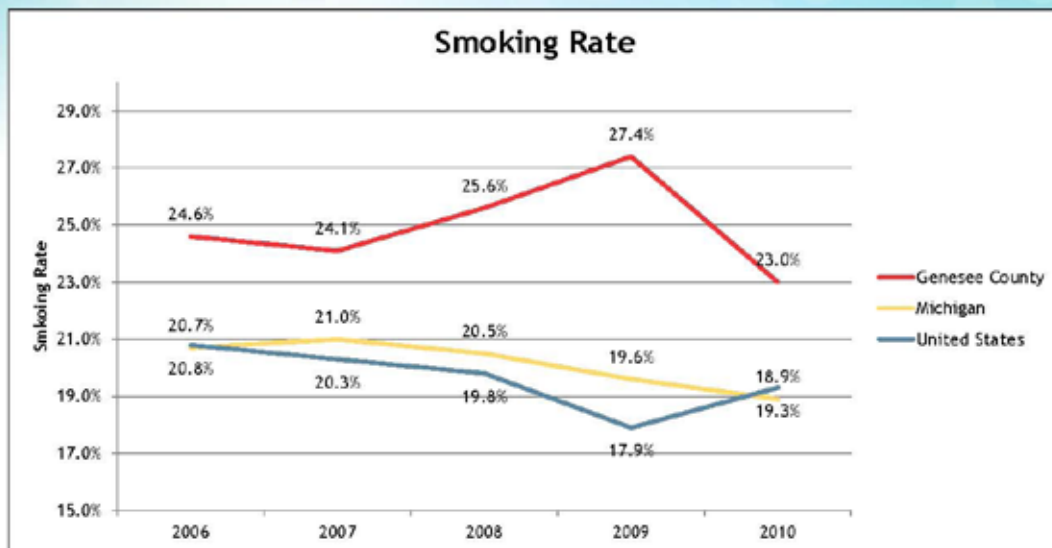
- Genesee County's diabetes prevalence is significantly higher than both the State and National Averages

Potential Impact on Community's Health

Diabetes is a significant health status indicator and high-cost disease

It is also the result of an unhealthy lifestyle lacking in physical activity and a healthy diet

SMOKING



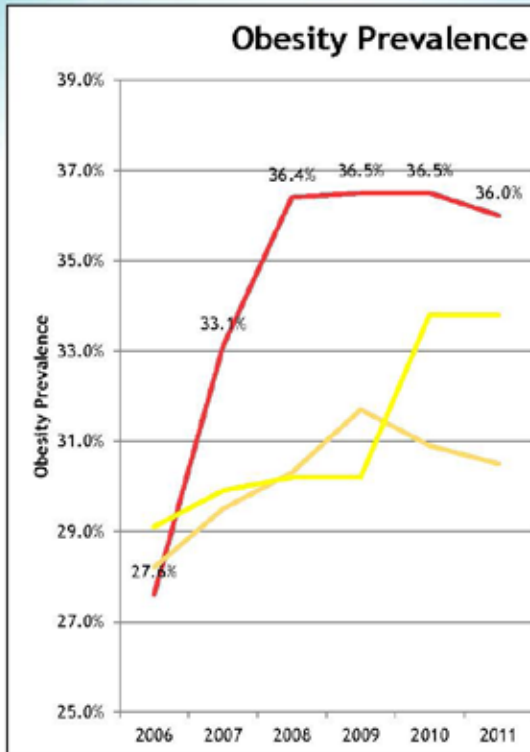
- Genesee County's Smoking rate is significantly higher than State and National Averages, but did show decline from 2009 to 2010

Potential Impact on Community's Health

Smoking is a significant risk-factor for poorer health (pulmonary, cardiac, etc.) and higher costs and there are minimal smoking cessation resources in Genesee County

HEALTH STATUS

OBESITY



SUPER-SIZED

The next two decades could bring a huge increase in obese Michigianians:

- 31%** of Michigan adults obese in 2011
- 59%** projected obese in 2030

...imposing a **HUGE** cost on the state.

\$3.1 billion spent on obesity-related health costs in 2008
\$12.5 billion projected obesity-related costs for 2018

State of Michigan and Trust for America's Health

- Genesee County's adult obesity rate is significantly higher than State and National Averages and trending negatively
- The combined obesity and overweight rate is also 71%

Potential Impact on Community's Health
Obesity is a significant health status indicator and risk-factor for a myriad of other health conditions

HEALTH STATUS

MORTALITY RATES

<u>Genesee County / Flint, Michigan</u>	CY 2010 Data	CY 2011 Data	% Recent Change
Mortality Rates, Total (per 100,000 residents)	905.5	963.1	6.36%
Heart Disease	240.0	254.9	6.21%
Cancer	206.1	225.9	9.61%
Chronic Lower Respiratory Diseases	52.4	56.4	7.63%
Stroke	52.0	54.0	3.85%
Unintentional Injuries	37.2	42	12.90%
Diabetes Mellitus	35.7	38.7	8.40%
Alzheimer's Disease	28.3	28.8	1.77%
Pneumonia/Influenza	13.6	14.6	7.35%
Kidney Disease	22.8	24.1	5.70%
Intentional Self-harm (suicide)	10.6	11.6	9.43%
All other causes	206.8	212.2	2.61%

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.



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Dear Readers,

The following article on CrossFit is being published as part of our continuing efforts to provide information which can help physicians and their families pursue healthier habits and which will also potentially impact patient outcomes and overall health in the community if acted on by our patients.

– Daniel J. Ryan, MD, Editor

Pete and Evan Levine



Evan Levine

CROSSFIT: Elite Fitness for Anyone

By Matt Greshock and Evan Levine, Certified Crossfit Trainers

Constantly varied, functional movements executed at a high intensity. These nine words are, in essence, the prescription of CrossFit. A fitness sensation which is gaining popularity throughout the country and across the world, the key to CrossFit's success is its focus on functionality. Less a strict exercise regimen than it is a way of exercising, these natural, practical movements – useful in everyday life for every human being – have created a fitness environment which can do as much for the 70-year-old grandmother, as for the 20-year-old collegiate athlete.

With this foundation in functional movements – bodyweight squats, pushups, pull-ups, barbell exercises, burpees, etc. – CrossFit workouts are created to be infinitely scalable. Composed of weightlifting, bodyweight movements, and conditioning, these workouts are accessible and beneficial to any person, be they young, old, heavy, slight, weak, strong, healthy, or infirm. CrossFit excels in creating an individual workout for each participant, based on their physical ability, allowing for similar levels of intensity and development across large groups. While one athlete deadlifts or squats a great deal of weight, another may simply pick something light up from the floor or perform bodyweight squats. The former may be looking to gain strength or increase their athleticism, while the latter may simply be retaining the ability to pick up the newspaper or stand from a chair with correct posture, preserving their independence. Nevertheless, they work out next to one another, during the same class.

In addition to CrossFit's focus on specific exercises, it places as much emphasis on diet and nutrition. Greg Glassman, the founder of CrossFit, describes healthy eating as “meat and vegetables, nuts and seeds, some fruit, little starch and no sugar. Keep intake to levels that will support exercise but not body fat.” This simple diet, lower in carbohydrates and higher in fats than those advocated by the US Department of Health, acts as the basis for athletic performance and development for each and every practitioner of CrossFit. By eating



Dr. Krishna and Jagdish Shah, Pete Levine and Matt Greshock



Mohammad and Muaz Jondy

food which promotes health, athletes of all ages not only lose weight, feel better, and test healthier at physicals, but are also able to exercise more efficiently, due to proper food fueling their bodies.

Through CrossFit’s foundation in functional exercise and proper nutrition, an environment of progress and development develops in each gym, and throughout the greater community. Personal records in certain movements or certain workouts are held as high, if not higher than worldwide records, as are weight loss goals. Indeed, the CrossFit community as a whole gathers yearly to participate in what is known as “The Open,” a series of workouts where athletes from across the world participate in a series of the same workouts, scalable of course, in which they compete against each other, and more so against themselves from the previous year. Through events such as “The Open,” local competitions, or inter-gym events, CrossFit breeds individuals who are as focused on encouraging and cheering the progress of others, as they are on their own development.

This ultra-supportive community truly is the strongest aspect of CrossFit. The tried and true, functional methods of exercising and healthy nutrition provide the basis for a type of fitness that, when paired with incredible encouragement, creates an atmosphere of health and happiness. CrossFit may seem intimidating at first, but one of its greatest attributes is that is infinitely scaleable. Which mean all exercises can be modified to accommodate any fitness level. Whoever the athlete is: a child, a collegiate football player, a grandfather, or someone with disabilities, CrossFit provides an environment where they can work together, and progress with the help of one another.



Meeting the health needs of Genesee County’s children

Child & Adolescent Psychiatry (810) 768-7561

- Medication Management
- Psychiatric Consultation
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- 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

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Genesee County Health Department

Mark Valacak, M.P.H., Health Officer
Gary K. Johnson, M.D., M.P.H., Medical Director

Current Date: July 1, 2013
Release Date: Immediate Release **End Date:** July 31, 2013
Contact Person: Ann Goldon **Phone:** (810) 341-5898
RE: Cigarette Butts Litter Local Parks and Beaches

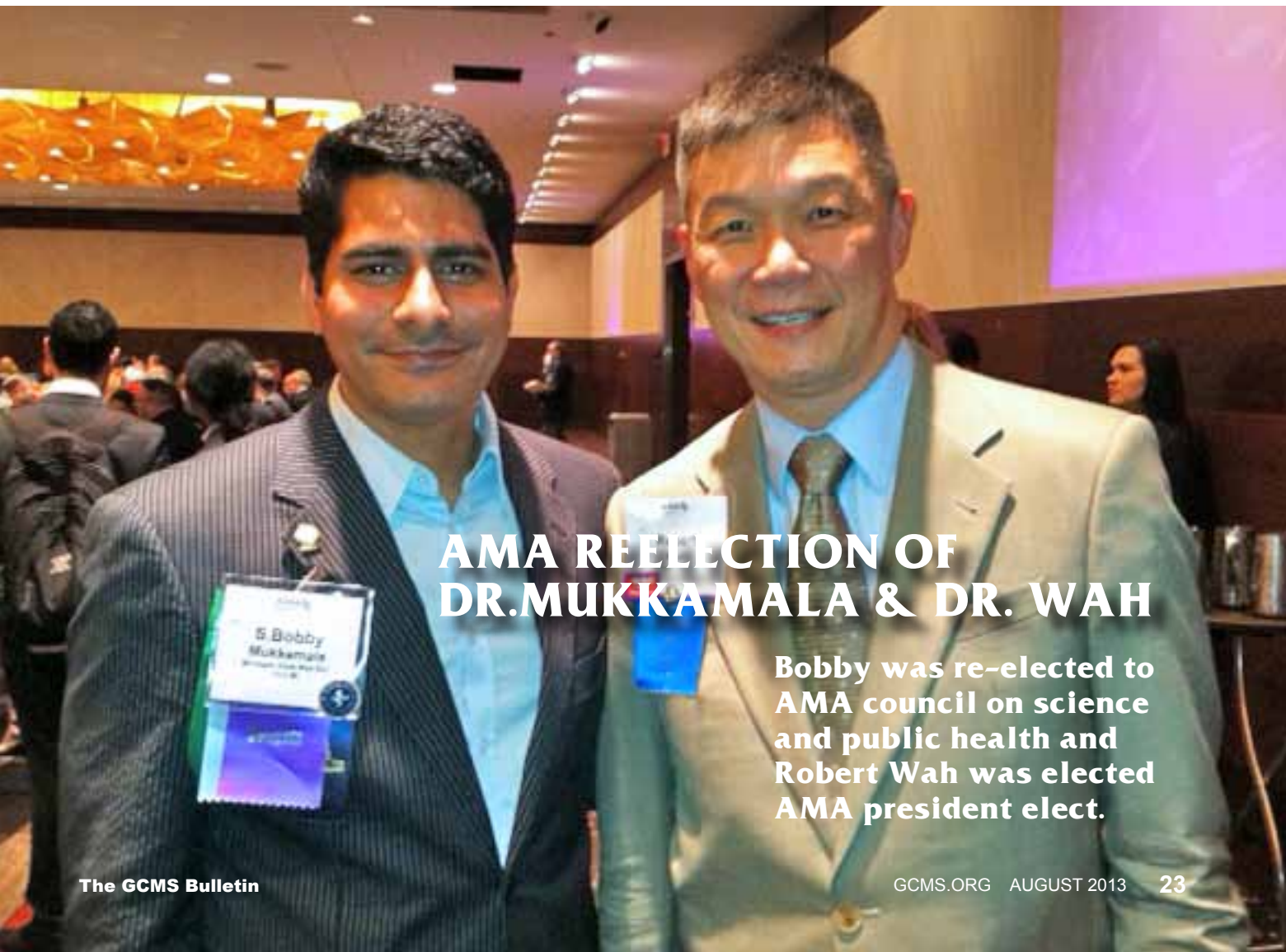
July is National Parks and Recreation Month. It is a great time to get active and have fun at your local parks. Unfortunately, what you may find when you visit some local parks is an abundance of cigarette butt litter. In November and April the Genesee County Health Department, the Smoke-free, Multi-Agency, Resource Team (SMART), and other concerned citizens visited a local park to clean up cigarette butts and other tobacco related litter such as empty cigarette/cigar packs and lighters. The amount of cigarette butt litter was astonishing.

Discarded cigarette butts are the most common form of litter. Studies show that cigarette butts are toxic, slow to decompose, and costly to remove. Children routinely pick them up and try to place in their mouths. In addition, butts that are not fully extinguished pose a fire and burn risk. Cigarette butts contain hazardous chemicals such as cadmium, arsenic and lead that are partially filtered out during smoking. When butts are discarded these trapped chemicals leak out of the filter and into the environment contaminating our waterways and land. Eighty percent of discarded butts on the ground find their way into our water systems and detract from the quality of our drinking water.

Tobacco-free parks and beaches are gaining popularity in various jurisdictions throughout the United States. Health Advocates across Michigan are working to encourage jurisdictions to enact tobacco free parks and beaches policies. Currently, 29 jurisdictions in Michigan have implemented policies to restrict or prohibit tobacco use in their parks.

At the June 4th Board of Health Meeting the cigarette butt litter collected along with a poster were displayed to bring awareness to this issue. The poster was produced and copyrighted by the California Department of Public Health, Tobacco Control Program. The display not only demonstrates the problem of cigarette butt litter but also our county's problem with nicotine addiction and secondhand smoke exposure in recreational areas. Genesee County's children deserve to play in recreation areas that are free from litter and secondhand smoke exposure. Genesee County currently has two smoke-free parks which include For Mar Nature Preserve and Clio Youth Sports Complex.

Technical assistance, tools, and signage are available through the Genesee County Health Department to local jurisdictions who want to implement tobacco free policies in their parks and beaches. For more information, please contact Ann Goldon, a Health Educator with the Genesee County Health Department.



AMA REELECTION OF DR. MUKKAMALA & DR. WAH

**Bobby was re-elected to
AMA council on science
and public health and
Robert Wah was elected
AMA president elect.**

YOUR GCMS BOARD at work



PRACTICE MANAGERS MEETING

DATE: August 22, 2013

TIME: 8-10 AM

PLACE: GCMS offices in the Rapport Conference Room

Topic: What is new With the Blues?????

Meet and Greet and Hear from Dan Martin, New Director of Provider Outreach, Blue Cross Blue Shield of Michigan.

Take advantage of this opportunity to interact with Mr. Martin and Tina Gach, Provider Consultant for BCBSM.

As we approach the major changes brought by the Affordable Care Act, ICD10, Insurance Exchanges and everything else, this is another opportunity to meet and interact with individuals who will be key in the implementation processes.

PLEASE RSVP EARLY AS SPACE IS LIMITED!

Please email your RSVP to: bdoty@gcms.org.

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.

INCOMPETENT PATIENT, WHO CAN MAKE A MEDICAL DECISION?

By Timothy H. Knecht, Esq., Cline, Cline & Griffin, P.C.

Under Michigan Law, three categories of individuals can make medical decisions for a person. Provided a person is competent, he or she can make his or her own medical decisions. Provided a person is competent, no one besides the patient can make medical decisions for that patient.

If a patient is incompetent, unable to make medical decisions for him or herself, a patient advocate or a guardian are the only people who can make decisions for that individual. A parent acts as a guardian for a patient under the age of eighteen (18) and can make decisions for that patient. An adult, a person over the age of eighteen (18), if incompetent or unable to make medical decisions can only make medical decisions through his or her duly appointed patient advocate or through a court appointed guardian. There are no exceptions, not even a spouse can make medical decision if the spouse has not been designated as a patient advocate. In theory, these concepts work. In practice, what is a physician to do?

Michigan Law provides that an individual who is eighteen (18) years of age or older, and is of sound mind, may designate in writing another individual who is eighteen (18) years of age or older to exercise powers concerning care, custody and

medical or mental health treatment decisions. This person is the patient advocate. A patient advocate designation must be in writing, signed by the patient, witnessed by two unrelated individuals and an acceptance must be signed by the

patient advocate.

Once these requirements are met, a patient advocate can make all medical decisions on behalf of the patient who is unable to make such decisions for him or herself. If a patient becomes able to make

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LOOKING TO IMPROVE PATIENT OUTCOMES?

medical decisions during the course of treatment, the patient advocate must step aside until the patient becomes incompetent once again. A patient may revoke his or her patient advocate designation at any time and in any manner sufficient to communicate the revocation. The patient advocate's authority would include medical treatment decisions, placement decisions, the ability to make an anatomical gift and generally, the ability to review medical records and otherwise make all decisions, including life and death decisions for and on behalf of the patient.

If a patient has not named a patient advocate and is unable to make medical decisions on behalf of him or herself, a guardian must be appointed to make decisions for and on behalf of that person. The appointment of a guardian requires a petition to be filed in court. A court hearing is then required before a guardian can be appointed to make decisions for the patient.

The patient advocate designation must be made part of the medical record to actually be effective. The best plan of attack is to make sure each of your patients has a properly designated patient advocate, before the need arises.

The Greater Flint Health Coalition and the Genesee County Medical Society support local practices and physicians to improve individual and overall patient health outcomes via the Commit to Fit! Program. The Program supplies all Genesee county physicians with free resources to be used to educate patients and to develop healthy lifestyle choices.

The Commit to Fit! Program offers support for outcomes in multiple forms. One of these being the interactive website which allows users to track daily activity and nutrition habits, view community health and fitness calendars, join fun challenges to earn prizes, and view current exercise and nutrition class schedules. The website can be used for individual reference and also for use as an activity and nutrition tracking report for a patient and their physician. It can be printed off and easily reviewed during appointments.

As mentioned, with support from Genesys Athletic Club, Hurley Health & Fitness Center, and the UM - Flint Recreation Center, we are proud to be offering exercise and nutrition classes free of charge to patients/staff/physicians/family and all those residing in Genesee County. There is no cost to the physician or the patient, no referral needed, and there are also incentives and rewards for attending these classes!

Along with our website and classes we have also supplied over 350 local physicians with free educational materials and practical tools for physicians and office staff to use with patients to stimulate meaningful behavior change. We offer informational posters, brochures, lifestyle prescription pads, and a number of other useful tools to promote overall health. Partnering with Commit to Fit! allows you to eliminate many of the common barriers to lifestyle change, giving patients a place to exercise for free and a form of positive reinforcement from their physician/specialist/nurse/etc. that strengthens the message of active living. By collectively working toward these goals we are continuing to lead Genesee County to better health status and outcomes.

Please contact Nick Bendall of GCMS with any questions and to receive these free materials and class offerings for your office. He can be reached by phone at 517-243-2008 or via email at nbendall@gcms.org.





Commit to Fit! Fitness Classes

Commit to Fit! is offering free fitness classes to all individuals who live or work in Genesee County/Flint. All participants will need to check-in prior to attending each class to complete a brief registration form. See back side for fitness center location details.

AUGUST 2013 SCHEDULE OF CLASSES

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AUGUST, 2013					1 Basic Yoga HHFC 6:45 p.m.	2	3
	4	5 Zumba (Beginner) Riverfront 5:30 p.m.	6	7 Zumba Gold (Beginner) GAC 5:30 p.m.	8 Basic Yoga HHFC 6:45 p.m.	9	10
	11	12 Zumba (Beginner) Riverfront 5:30 p.m.	13	14 Zumba Gold (Beginner) GAC 5:30 p.m.	15 Basic Yoga HHFC 6:45 p.m.	16	17
	18	19 Zumba (Beginner) Riverfront 5:30 p.m.	20	21 Zumba Gold (Beginner) GAC 5:30 p.m.	22 Basic Yoga HHFC 6:45 p.m.	23	24
	25	26 Zumba (Beginner) Riverfront 5:30 p.m.	27	28 Zumba Gold (Beginner) GAC 5:30 p.m.	29 Basic Yoga HHFC 6:45 p.m.	30	31

Participants will be required to complete a brief registration process at the fitness centers' front desk prior to participating in each class. If you have questions please email commit2fit@flint.org.

CLASSES ARE FREE-OF-CHARGE TO RESIDENTS, HOWEVER, ARE ONLY AVAILABLE TO ADULTS (AGES 18 & UP) AND ARE FIRST COME FIRST SERVE SO ARRIVE EARLY!!! SEE BACK SIDE FOR ADDITIONAL INFORMATION!!!

Commit to Fit! Fitness Classes

FITNESS CENTER LOCATION INFORMATION

Participants will be required to complete a brief registration process at the fitness centers' front desk prior to participating in each class. Please email commit2fit@flint.org with questions.



Fitness Center	Location
Hurley Health & Fitness Center (HHFC)	4500 South Saginaw Street Flint, MI 48507 (810) 262-2222
Genesys Athletic Club (GAC)	801 Health Park Boulevard Grand Blanc Township, MI 48439 (810) 606-7300
Riverfront Banquet Center (Riverfront)	1 Riverfront West Flint, MI 48502

For updated monthly calendars of the *Commit to Fit!* Fitness Classes, please visit:

commit2fit.com

September Dinner Business Meeting
**GCMS/GCMSA ART, TALENT
AND CRAFT SHOW**

ATTENTION

GCMS and GCMSA Members with Talent
Bring all your friends, colleagues and family

Talent Show Featuring GCMS & GCMSA Members
(and Members' Practice Managers)

Join your fellow members, sponsors and guests for an evening of friendship, fun and entertainment. Sit back and relax as our gifted members entertain you with songs, dances, poetry and instrumental recitals, immediately after dinner and a short business meeting. And while you are there, don't forget to check out the artwork, jewelry, sculpture and a variety of other items made by our members on display for the evening. If you have a talent you would like to share with the group, please call ASAP.

Have a great summer!

FRIDAY, SEPTEMBER 6, 2013

Genesys Conference Center

5:30 p.m. - Socializing and viewing art

7:00 p.m. - Dinner and meeting

7:30 p.m. - Talent show

RSVP regarding participation and to reserve to attend:

Peter Levine (810) 733-9925 Cheryl Thoms (810) 732-7719

HAPPY BIRTHDAY DOCTOR

AUGUST

Scott Plensdorf	1	Frazer Wadenstorer	12	Khalid Latif	20
John Schultz	2	Edward Christy	13	Liza Weathersby	22
Leo Madarang	2	Anup Sud	13	Kashif Khan	23
Hossam Hafez	2	Robert James	14	Bharat Mehta	24
Harvey Olds	3	Deborah Duncan	15	Marcos Machado	24
Christopher Sweet	4	Ayman Tadros	15	Gary Johnson, MPH	26
Ann Burton	4	Carlos Petrozzi	16	D V Pasupuleti	27
Venkat Rao	5	Larry Young	16	Michael Kirby	28
Brian Nolan	6	Rebecca Baumbach	16	Orlando Filos	29
Paul Musson	8	Iqbal Allarakhia	17	Jack Portney	29
Zouheir Fares	8	Cathy Blight	17	Julian Moore	30
Kimberly Pummill	8	Kevin Bur	17	Kavitha Kesari	31
James Forshee	10	Fidel Seneris	18	Lisa Guyot	31
Sreenivas Mannam	10	Lavanya Cherukuri	19		
Louinda Zahdeh	11	Cheng Yang Chang	20		

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.

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



SAVE THE DATE FOR 2013

PRESIDENTS' BALL ON NOVEMBER 9



**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!

