THE BULLETIN

2026

VOLUME 101 NUMBER 2

February

WHY DO MEN DEVELOP A GREATER RISK OF CARDIOVASCULAR DISEASE YEARS EARLIER THAN WOMEN?.

SAVE THE DATE
MARCH 17TH
7-8:30 P.M.

A CONVERSATION WITH **AMA PRESIDENT** AND FLINT OTOLARYNGOLOGIST ***DR. BOBBY MUKKAMALA*** BRING YOUR QUESTIONS AND INPUT FOR OPEN DISCUSSION!

HPV VACCINATION TIMELINE

INFORMATION FROM THE GENESEE COUNTY HEALTH DEPARTMENT!!!!

Black History Month and Medicine

GENESEE COUNTY MEDICAL SOCIETY Established 1841

RELAPSING MULTPLE SCLEROSIS NEWS

Organized Medicine's Leading Edge

THE BULLETIN is published monthly by:
The Genesee County Medical Society

FBRUARY 2026 VOLUME 101 NUMBER 2

THE BULLETIN

FEATURE ARTICLES

READ BY 96% OF GCMS MEMBERS

REGULARS

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) 733-9923

Buy 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 1st 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 .

GENESEE COUNTY MEDICAL SOCIETY
Established 1841

GCMS Meetings

Legislative Meeting
March 2nd, 2026
9:00 A.M

Practice Manager Meeting
March 12th, 2026
9:00 A.M

MCC EVENTS CENTER
March 17th, 2026
7:00-8:30 P.M.

Board of Directors
March 24th, 2026
6:00 P.M.

Town Hall
T.B.D.

A MESSAGE FROM OUR PRESIDENT

I had the pleasure of attending the Mid-Michigan Islamic Medical Association dinner this month, where I was welcomed by many legendary physicians in our community. Dr. Mukkamala delivered a thoughtful address via Zoom from Washington, DC, and I was honored to attend alongside fellow GCMS members Dr. Omar Khorfan, President of IMA, Dr. Belal Tarakji, Dr. Sajid Chaudhary, Dr. Allision Kinning, Dr. Sunil Rao, Dr. Ehab Yousef, Dr. Macksood Aftab and Director David Hoff.

It is extraordinary to reflect on how communities' function at the intersection of medicine and spirituality. Previous GCMS President Dr. Macksood Aftab and I have often discussed the study of consciousness, particularly from his perspective rooted in advanced brain imaging. I have been struck by the intellectual convergence of our conversations, especially regarding the precuneus as a central node of the Default Mode Network and the deeper metaphysical implications that arise when exploring models such as occasionalist property dualism or substantial dualism. While reductionism can be clinically useful, it ultimately invites larger philosophical questions that science alone cannot fully answer.

The disciplined development of consciousness, through faith, reflection, and moral formation, is what unites us as human beings. That pursuit not only deepens our individual character but also strengthens us as physicians and community leaders.

At the same time, society continues to debate artificial intelligence and the concept of machine self-awareness. Yet computers remain dependent upon human input. Even with sophisticated machine learning, we are still working within architectures of binary code expressed through algorithms, a far cry from lived human consciousness.

I am deeply grateful for the physicians in this community and for Dr. Aftab's ongoing scholarship. For those interested in exploring these ideas further, he has contributed a chapter to Bridging Bioscience and Islam, scheduled for release on April 20, 2026. It is a testament to Flint's intellectual openness that discussions here can draw equally from Aristotle, Aquinas, Madhvacharya, or Al-Ghazali.

It is a privilege to practice medicine in a community that welcomes both scientific rigor and thoughtful reflection.

DR. MICHAEL DANIC, D.O.

GCMS PRESIDENT

A MESSAGE FROM OUR EXECUTIVE DIRECTOR

Michigan State Medical Society Membership Reorganization Task Force Recommendations

The Genesee County Medical Society has a membership partnership with Michigan State Medical Society dating back to 1859 (per Rebecca Blake MSMS). It has been mandatory a physician member must join both organizations and pay both membership dues.

MSMS has experienced declining membership for many years consecutively. Due to the significant decline in membership, Michigan State Medical Society Board of Directors in 2025 assigned a membership task force to address long term viability.

Over the past six years the Michigan State Medical Society has lost about 50% of its active membership. Last Summer a Membership Task Force was organized by MSMS to address membership reduction concerns. MSMS faces significant challenges with the structure, finances, and total membership that threaten its long-term viability. The Reorganization Task Force was appointed by the MSMS Board of Directors, following a resolution that was written and adopted by the 2025 House of Delegates. The appointed task force for MSMS was challenged to develop recommendations for policy changes for long-term survival of the organization.

After extensive review and deliberation, the task force and Michigan State Medical Society Board of Directors Recommend four Structural changes.

The structural changes are designed to position MSMS for long term survival and financial stability.

The recommendations require MSMS bylaw changes; they will be submitted to the House of Delegates for vote in April.

The MSMS Task Force recommendations are:

1. Discontinuance of the annual House of Delegates and replacing with a year-round policy forum for all MSMS members.
2. Eliminating the mandatory dual membership with county medical societies. Allowing physicians to join only one organization or both.
3. Eliminating the Judicial Commission and requirement for county medical societies to maintain a peer review and ethics committee.
4. A recommendation was also made to restructure the MSMS Board of Directors, however a final recommendation has not been submitted at this time.

The first 3 resolutions have been approved by the MSMS Board of Directors and will go to vote at the April 18, 2026 House of Delegates.

MSMS BYLAWS AMENDMENTS:

The bylaws may be amended by a majority vote of the delegates seated, after the proposed amendments is laid on the table until the next session, unless by consent 75 percent of the delegates present and voting. Such time requirement is waived, in which event the said amendment may be

voted upon at the next meeting of the House of Delegates. The amendment or amendments to these bylaws become effective immediately upon adoption.

The MSMS Bylaws may be amended by a 75 percent majority vote of the delegates seated at the HOD. The time requirement of two readings is waived by a passing of a minimum of 75 percent of the delegates present and voting, in which case the amendment can be approved with a single vote at the HOD. At that time the amendment to the bylaws becomes effective immediately upon voting approval and adoption.

The Michigan State Medical Society Membership Task force has determined if these recommendations are not adopted and current membership decline continues, MSMS will need to make these cost cutting actions immediately:

1. Further staff reductions possibly down to three employees (MSMS has already cut 153 employees down to 20 employees).
2. Elimination of CME education programs.
3. Elimination of advocacy and policy staff.
4. Selling or closing subsidiary businesses.
5. Downsizing to a staff of 3 employees.

The Genesee County Medical Society is concerned for the possible bylaws change eliminating the long-standing membership partnership. Currently MSMS collects all membership dues and distributes the counties their portion.

Under the new recommendations (if passed), physicians will have a choice to join the county medical society, MSMS, or both. Both organizations will be responsible for their own billing (two separate bills when joining both).

Genesse County Medical Society is a very stable organization, financially sound and ready for any challenges in the future. GCMS is one of the most robust county medical societies engaged with its members.

Please consider becoming a member of an organization in existence since 1841.

For comments or questions please contact:

executivedirector@gcms.org

DAVID HOFF, MA, CCP

GCMS EXECUTIVE DIRECTOR

BALLENGER
EMINENT PERSONS LECTURE SERIES
A PROGRAM OF MOTT COMMUNITY COLLEGE

A Conversation With Dr. Bobby Mukkamala

President, American Medical Association and Flint Otolaryngologist

Tuesday
March 17
7-8:30pm
MCC Events Center
1401 E. Court St., Flint

We welcome audience input and questions
First-come, first-serve
Doors Open at 6:30pm

Endorsed by
GENESEE COUNTY MEDICAL SOCIETY

In other heart news……

MEN DEVELOP A GREATER RISK OF CARDIOVASCULAR DISEASE YEARS EARLIER THAN WOMEN.. CNN (2/2, Koda) reports a study found that “men develop a greater risk of cardiovascular disease years earlier than women – starting at around age 35.” The report “followed more than 5,000 adults from young adulthood and found that men reached clinically significant levels of cardiovascular disease about seven years earlier than women.” Prior to their early 30s, researchers stated that “men and women had similar short-term cardiovascular risk. But at around age 35, the risk began to diverge. Men began to face a consistently higher 10-year risk than women.” Over the follow-up period, they observed that “men developed cardiovascular disease earlier than women. By about age 50, 5% of men had developed cardiovascular disease – nearly seven years earlier than women, who reached the same level around age 57. Specifically for coronary heart disease, the difference in risk between men and women was even more pronounced.” The study was published in the Journal of the American Heart Association.

Dear Colleagues,

I am reaching out to share an important call to action from the Genesee County Health Department and the Vaccinate Genesee County Initiative Team focused on providing a strong recommendation for the HPV vaccination at age 9 for both boys and girls.

In the attached letter, local and national data show that children who start the HPV vaccine series at ages 9–10 are more than twice as likely to complete the series on time, and that earlier vaccination leads to stronger, longer-lasting protection against HPV-related cancers.

The health department is asking providers to:

- Recommend HPV vaccination beginning at age 9 for both boys and girls.
- Present HPV vaccination as routine and essential, alongside other adolescent vaccines like Tdap and MMR.
- Use strong, presumptive language (the “Announce Approach”) to normalize HPV vaccination and support on-time series completion.

Our team is here to support practice-level education, including help identifying patients who are missing doses and educational materials for staff and families. If your office would like assistance or resources, you can contact JoAnne Herman, RN, at jherman@geneseecountymi.gov or book a time with Leah Johnson to discuss vaccine rate improvement efforts in your office.

Thank you for all you do to protect children and families in our community and for considering how your practice can support earlier HPV vaccination. Please share this with the physicians and team members in your practice.

Kindly,

JoAnne Herman (She/Her)

Nurse Coordinator

Genesee County Health Department

HEALTH OFFICER
Michelle Estell, RS, MSA

GENESEE COUNTY HEALTH DEPARTMENT

MEDICAL DIRECTOR
Michela Corsi, MD, MPH, MA

To Healthcare Providers,

As a trusted voice in our community, your guidance is crucial in protecting children's health. Your recommendations carry significant weight with parents and families. You have the power to help prevent cancer by encouraging HPV vaccination beginning at age 9 for both boys and girls.

Why Your Voice Matters

- **Families Trust You**: Research shows that parents are most likely to vaccinate their children when a healthcare provider strongly recommends it. Your words can move families from hesitation to action.
- **You Set the Standard**: When you present HPV vaccination as routine and essential—just like Tdap and MMR—families are more likely to follow through.

Key Reasons to Recommend HPV Vaccination at Age 9

- **Endorsed by Leading Organizations:** The American Academy of Pediatrics (AAP) and the American Cancer Society (ACS) recommend prompting HPV vaccination starting at age 9.
- **Higher Completion Rates**: Children who start the HPV vaccine at ages 9–10 are more than twice as likely to complete the series by age 13 (74% vs. 31%)[1].
- **Stronger, Lasting Immunity**: Younger children who have not been exposed to the virus develop a more robust immune response, ensuring long-lasting protection[2].

How You Can Make a Difference

- **Initiate the Conversation**: Proactively recommend HPV vaccination at age 9 at every opportunity. Continue the discussion at future visits if the vaccine is not accepted at age 9.
- **Normalize Early Vaccination**: Present HPV vaccination alongside other routine immunizations.

Your recommendation is the strongest predictor of HPV vaccination. By championing early initiation at age 9, you can help close the gap, prevent cancer, and give every child the best chance for a healthy future.

Our Commitment to Support You

Here in Genesee County, our HPV completion rates are **far below the national and state levels**—only one third of our eligible children are protected. We are committed to partnering with you to improve these rates within your practice. We are actively working to provide resources, support, and data to help you identify patients who need vaccination and to address barriers together.

If you would like assistance identifying incomplete patients or need educational materials for your staff or families, please reach out to us at jherman@geneseecountymi.gov. We are invested in supporting your HPV vaccination efforts and are here to help.

Thank you for being the trusted health messenger your community needs.

With enthusiasm for a cancer-free future,
Vaccinate Genesee County Initiative Team

Michelle Estell, RS, MSA
Michela Corsi, MD, MPH, MA
Kimberly Lorick DNP, APRN, FNP-BC, CLC
Jessica Parks, RN
JoAnne Herman, RN
Amy R. Turner, RN
Mikayla Benbow, MPH
Leah Johnson, MPH, CHES

1. St Sauver, Jennifer L et al. "Younger age at initiation of the human papillomavirus (HPV) vaccination series is associated with higher rates of on-time completion." Preventive medicine vol. 89 (2016): 327-333. doi:10.1016/j.ypmed.2016.02.039
2. Ellingson, M. K., Sheikha, H., Nyhan, K., Oliveira, C. R., & Niccolai, L. M. (2023). Human papillomavirus vaccine effectiveness by age at vaccination: A systematic review. Human vaccines & immunotherapeutics, 19(2), 2239685. https://doi.org/10.1080/21645515.2023.2239685

324 S. SAGINAW STREET, SUITE 6 I FLINT, MICHIGAN 48502
MAIN PHONE 810-257-3612 | WWW.GENESEECOUNTYMI.GOV

HEALTH OFFICER
Michelle Estell, RS, MSA

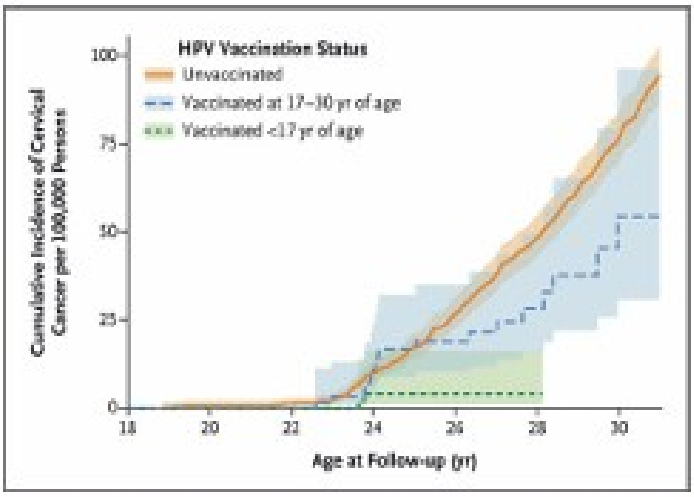
GENESEE COUNTY HEALTH DEPARTMENT

MEDICAL DIRECTOR
Michela Corsi, MD, MPH, MA

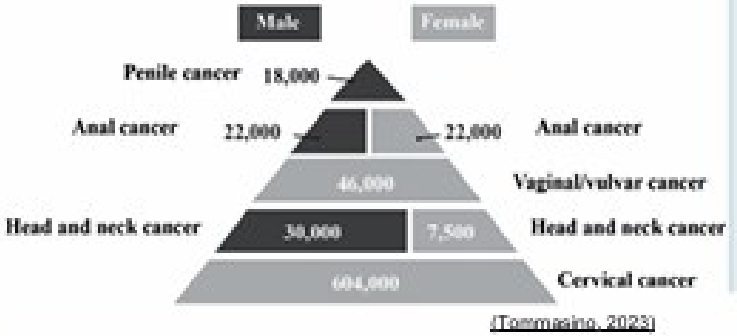
Impact on Cervical Cancer Incidence

A sample of 1,672,983 girls and women who were 10 to 30 years of age from 2006 through 2017.

Those vaccinated before 17 had a significantly lower risk (88%) of developing cervical cancer.



The Global Burden of Cancers Attributable to HPV Infection by Site and Gender



(Tommasino, 2023)

Increase in Oral & Oropharyngeal Cancers Relating to HPV

Oral HPV infection is a primary cause of oropharyngeal cancer (OPC) in the United States and HPV-16 is present in ~90% of HPV-associated OPC cases in the United States.

The OPC burden more heavily impacts men.

Announce Approach: Strong, Effective Recommendation

Starting the HPV vaccine series at age 9 boosts on-time series completion. The AAP and ACS support vaccination at age 9 as safe and effective—an early recommendation offers flexibility, and separates the shot from discussions about sex. In the U.S., most providers are open to recommending at age 9, but report needing communication tools and strategies. The Announce Approach is a well-tested communication strategy we recommend all providers implement.

Step 1. Announce Communication Strategy

Note the child's age: Age 9-10:

"Alex is now 9, so today they'll get a vaccine that prevents six HPV cancers."

Focus on diseases, not vaccines:

Use presumptive language and show urgency by saying you will vaccinate today.

Step 2 & More Information on Announce Approach Effectiveness

GUEST ARTICLE

THE GENESEE COUNTY MEDICAL SOCIETY - A DIAMOND IN THE ROUGH

Dear Members,

It has been eight years since retired from my practice at the Michigan Vascular Center and moved to Queen Creek, Arizona, a suburb in the southeastern part of Phoenix, yet I still think longingly at what the Genesee County Medical Society (GCMS)offered. It is said that one does not know what one has until it is lost and such is the case with me and the GCMS.

Moving to a distant location where one is a medical "outsider" was a new and discomforting experience. Unlike the camaraderie I experienced in Flint when I first arrived in 'September of 1975, I found myself to be a stranger in the medical world of Queen Creek. Fortunately I did know one local vascular surgeon whose references I sought but I found that meeting a local colleague was a strange experience. Absent was the warm, encouraging, inclusive message to join the local medical society as I experienced when I came to Flint in 1975. Rather my experience was as if being being a "medical colleague" carried no significance or created no bond. This bothered me as this particular "culture" permeated the staffs of the medical practices I subsequently sought help from. The MD after my name meant nothing to the staffs as I was constantly addressed by my first name.

What was it that changed so much? Was it the move? Was I expecting too much? Was it the times? Was I a prisoner of another age? As I thought about this change one thing occurred to me and that was the experience I had throughout my career with the GCMS, its leadership and my colleague/friends. I will never forget how i was not only encouraged by my senior members to join the GCMS and the warm and welcoming reception I received at my first meeting. I was no longer a stranger but a welcomed colleague. I will admit I was not a regular at the meetings but everytime I went there was a spirit of camaraderie that permeated the place. From the President's Ball to the special session meetings dealing with important medical topics, to conferences at AMA meeting to just sitting and having a chat with colleagues I did not often see, the GCMS was special as it was the venue that helped create a bond among colleagues.

During my career I wondered why those well into retirement would come to meetings and ! have learned the answer - the GCMS was/is as much a grand, welcoming social event as it is medical event. All are welcome. So my message to its members is very simple-enjoy the camaraderie and special social contacts you can share with your colleagues at the GCMS while you have the opportunity. There really is nothing quite like it.

Best Regards,
Carlo A Dall'Olmo, MD
Emeritus, Michigan Vascular Center

The National Medical Association (NMA) is the nation's oldest and largest organization representing African American physicians and health professionals in the United States. Established in 1895, the NMA is the collective voice of more than 30,000 African American physicians and the patients they serve.

The NMA was founded in 1895, during an era in US history when the majority of African Americans were disenfranchised. The segregated policy of "separate but equal" dictated virtually every aspect of society. Racially

Under the backdrop of racial exclusivity, membership in America's professional organizations, including the American Medical Association (AMA), was restricted to whites only. **The AMA** determined medical policy for the country and played an influential role in broadening the expertise of physicians. When a group of black doctors sought membership into the AMA, they were repeatedly denied admission. Subsequently, the NMA was created for black doctors and health professionals who found it necessary to establish their own medical societies and hospitals.

"Conceived in no spirit of racial exclusiveness, fostering no ethnic antagonisms, but born out of the exigency of the American environment…" the NMA extended equal rights and privileges to all physicians. Although the NMA has led the fight for better medical care and opportunities for all Americans, its primary focus targets health issues related to minority populations and the medically underserved. The NMA remains committed to improving the health status and outcomes of African Americans and the disadvantaged.

Accepting New Patients

Ahmad Munir, MD
Board Certified in:
General & Interventional Cardiology
Specializing in:
Structural & Heart Valve Diseases

Munir Heart & Valve Clinic
1335 South Linden Rd. Suite A
Flint, MI 48532
To schedule an appointment:
810-875-9616

FROM THE DESK OF THE GCMSA PRESIDENT...Amanda Bauer~

GCMSA

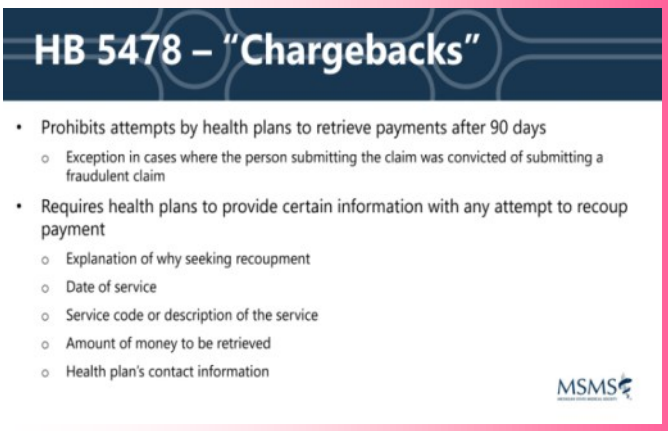
This month GCMSA met at *Paint With A Twist* in Fenton for a painting event. Each member was able to express their inner artist while guided by a professional painter. Everyone did an amazing job and maybe a few discovered a hidden talent!

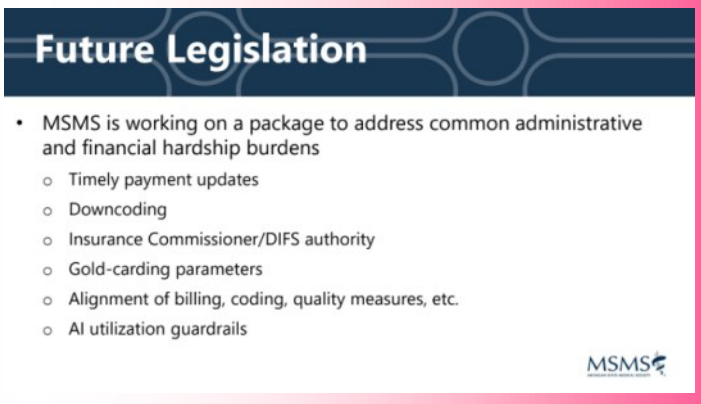
Next month we will meet for book club to discuss The Correspondent by Virginia Evans.

PRACTICE MANAGERS MEETING…. *PRODUCTIVE, EXCELLENT & INFORMATIVE*..JUST A FEW WORDS TO DESCRIBE OUR LAST MEETING..

Representatives from MSMS and several Practice/Office Managers from across the County were in this months meeting .

Thank you Julie Forbush from SOVITA for joining us in our monthly meeting with important information about services the company has to offer and for your continued support!!



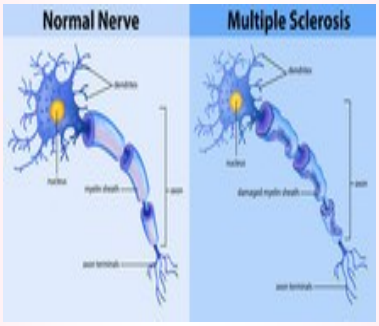


Please join AMA CEO John Whyte, MD, MPH for an open forum discussion with AMA Federation State and County Medical Society staff on **Tuesday, March 31, 2026, at 2pm CST.** Dr. Whyte will host this conversation intended to discuss current issues facing your organizations, increase dialog between Federation partner organizations and the AMA, and compare notes with colleagues and peers.

Register for the meeting here. ⟸ Register

From the AMA

From the AMA



Continued treatment with ublituximab provides sustained clinical benefits for relapsing MS

Multiple Sclerosis News Today (2/20, Maia) reported, that researchers have found that "continued treatment with...Briumvi (ublituximab) provides sustained clinical benefits for people with relapsing forms of multiple sclerosis (MS), particularly if started earlier." Investigators found that "after five years of follow-up, more than 80% of participants who started Briumvi in the main trials remained free of relapses and of confirmed disability progression, while one in six had improvements in disability." The findings were published in JAMA Neurology.

From the AMA

James Van Der Beek's death spotlights rise in colorectal cancer among younger adults

NBC News (2/15, Sullivan) reports, "The recent death of the 48-year-old actor James Van Der Beek is again highlighting how colorectal cancer is increasingly killing younger people." Since 1990, "cancer death rates in people younger than 50 have dropped by 44%." However, "after increasing for decades, colorectal cancer is now the leading cause of cancer death in people under 50." According to NBC, "federal cancer screening guidelines and the American Cancer Society recommend that people who have an average risk for colorectal cancer should begin screening at age 45 with a colonoscopy every 10 years, or a stool test every one to three years."

MEMBERSHIP

Membership in the Genesee County Medical Society (GCMS) gives you the opportunity to share resources, discuss ideas, and network with some of the most active and respected physicians in the state. You will receive news and information via The Bulletin magazine, meetings, faxes, and emails. Because GCMS is politically aggressive, it can provide its members with myriad opportunities to shape the future of medicine locally, as well as on a state and national level.

When you join GCMS you also join the Michigan State Medical Society (MSMS). MSMS has experts to assist you with practice management, business strategies, third party reimbursements, and contracting issues.

GENESEE COUNTY MEDICAL SOCIETY
Established 1841

CLICK TO LEARN MORE AND JOIN

TOP 7 REASONS TO JOIN

1. GCMS is an aggressive advocate on behalf of member physicians with third-party-payers.

2. GCMS is an aggressive advocate on behalf of its members physicians and their patients with state and federal legislatures.

3. When specific issues arise that require immediate action, email blasts are instituted to communicate directly with over 1500 email recipients.

4. GCMS convenes monthly meetings with Practice Managers in an effort to head off problems for physician practices and to find solutions to those that are identified.

5. GCMS is a national leader by providing leadership at the state and federal level through volunteer physicians, staff, and Alliance member involvement leadership positions.

6. GCMS is disproportionality influential on behalf of its member physicians and their patients.

7. GCMS holds quarterly meetings with federal and state legislators and communicates with them at other times on as as-needed basis.

PHONE: (810) 733-9923
ADDRESS: 4438 OAK BRIDGE DRIVE, SUITE B, FLINT, MI 48532

Exceptional outpatient imaging

Your choice of where to refer your patients for imaging is a direct reflection on your practice. RMI is Michigan's leading outpatient imaging provider because we offer:

- The complete range of diagnostic and women's imaging services, including the most advanced 3D mammography, 4D MRI, high-resolution CT, PET imaging and more.
- The only outpatient centers to be ACR accredited for quality and safety in every single category
- Recognized as an ACR Breast Center of Excellence
- Most insurance and Medicare accepted
- Recognized as an ACR Prostate Center of Excellence
- A more comfortable, spa-like environment for a noticeably superior patient experience
- Extremely competitive cash pricing – often 3X less than other medical centers
- Evening and weekend appointments available

Clinicians experience flexible scheduling, fast report turnaround, subspecialty radiology expertise, 24x7x365 portal access and doctors who always have time to consult with them.

Refer your patients to RMI with confidence!

Schedule an RMI Exam Today!

Novi · Royal Oak · Southgate · Flint · Fenton
Grand Blanc · Davison · Lapeer · Petoskey

rmipc.net

RMI 40 YEARS
REGIONAL MEDICAL IMAGING

FOR MORE INFORMATION– CLICK LINK BELOW

https://www.hurleymc.com/services/lung-center/

A Breakthrough in Lung Cancer Diagnostics

The **ION Endoluminal System** represents the next frontier in robotic-assisted lung cancer diagnostics.

Specifically designed to navigate the complexities of the lung, the ION system enables physicians to obtain tissue samples from deep within the lung with remarkable accuracy.

- Ultra-thin, maneuverable catheter allows access to hard-to-reach areas of the lung.
- Unmatched stability and precision signif-cantly outperform traditional manual biopsy techniques.
- 50% of all lung biopsy in the US will be done with ION Robotic Bronchoscopy this year.
- Early detection of even the smallest tumors enhances outcomes and reduces risk. Lower complication rates, including reduced risk of lung collapse.

"This groundbreaking tool provides physicians with a safer, more efficient way to diagnose lung cancer earlier, ultimately improving survival rates and patient care."

Rick Barker,
Director of Respiratory & Neurology Services

For referrals, contact Hurley Lung Center at 810.262.9309.

LUNG CENTER

HURLEY

EDUCATION UPDATE

CME Requirements

MSMS FOUNDATION

MARCH 2023

Osteopathic Physician (DO) Licensure Requirements

Each osteopathic physician is required to accumulate 150 hours of continuing education in activities approved by the board during the 3 years immediately preceding the application for renewal of which a minimum of 60 hours of the required 150 hours must be earned through Category 1 programs. Following are other license requirements for:

Controlled Substance Licenses:

Opioids and Other Controlled Substances Awareness Training Standards for Prescribers and Dispensers of Controlled Substances

This is a one-time training that is separate from continuing education for an individual seeking a controlled substance license or who is licensed to prescribe or dispense controlled substances.

Licensees that prescribe or dispense controlled substances who renewed in 2019 must complete training by January 2023; renewals for 2020 by 2024, renewals for 2021 by 2025. Beginning in September 2019, completion of the training is a requirement for initial licensure.

Training content must cover all of the following topics:

- Use of opioids and other controlled substances.
- Integration of treatments.
- Alternative treatments for pain management.
- Counseling patients on the effects and risks associated with using opioids and other controlled substances.
- The stigma of addiction.
- Utilizing the Michigan Automated Prescription System (MAPS).
- State and federal laws regarding prescribing and dispensing controlled substances.
- Security features and proper disposal requirements for prescriptions.

For Medical Licenses:

Training Standards for Identifying Victims of Human Trafficking

This is a one-time training that is separate from continuing education. Licensees renewing for 2017 must complete training by renewal in 2020; renewals for 2018 by 2021, and renewals for 2019 by 2022. Beginning in 2021, completion of the training is a requirement for initial licensure.

Training content shall cover all of the following:

- Understanding the types and venues of human trafficking in this state or the United States.
- Identifying victims of human trafficking in health care settings.
- Identifying the warning signs of human trafficking in health care settings for adults and minors.
- Resources for reporting the suspected victims of human trafficking.

Education on Pain and Symptom Management

A minimum of 3 hours of continuing education every 3-year relicense cycle. At least 1 of the 3 hours must include controlled substances prescribing.

Continuing education hours may include, but are not limited to, any of the following areas:

- Public health burden of pain.
- Ethics and health policy related to pain.
- Michigan pain and controlled substance laws.
- Pain definitions.
- Basic sciences related to pain including pharmacology.
- Clinical sciences related to pain.
- Specific pain conditions.
- Clinical physician communication related to pain.
- Management of pain, including evaluation and treatment and nonpharmacological and pharmacological management.
- Ensuring quality pain care and controlled substances prescribing.
- Michigan programs and resources relevant to pain.

Medical Ethics

A minimum of one-hour of continuing education every 3-year relicense cycle.

Implicit Bias

A minimum of 3 hours every 3-year relicense cycle. New licensees need 2 hours within the 5 years immediately preceding.

Renewals from June 1, 2022 – May 31, 2023, need 1 hour; renewals from June 1, 2023 – May 31, 2024, need 2 hours; renewals from June 1, 2024 – May 31, 2025, need 3 hours. Then after, every 3-year renewal cycle will need to report 3 hours. (Any hours after June 2021 can be used.)

Training must include strategies to reduce disparities in access to and delivery of health care services and the administration of pre- and post-test implicit bias assessments.

Acceptable modalities of training include asynchronous teleconference or webinars, in addition to live activities and live webinars.

Training content must include, but is not limited to, 1 or more of the following topics:

- Information on implicit bias, equitable access to health care, serving a diverse population, diversity and inclusion initiatives, and cultural sensitivity.
- Strategies to remedy the negative impact of implicit bias by recognizing and understanding how it impacts perception, judgment, and actions that may result in inequitable decision making, failure to effectively communicate, and result in barriers and disparities in the access to and delivery of health care services.
- The historical basis and present consequences of implicit biases based on an individual's characteristics.
- Discussion of current research on implicit bias in the access to and delivery of health care services.

EDUCATION UPDATE

CME Requirements

MSMS FOUNDATION

MARCH 2023

Medical Doctor (MD) Licensure Requirements

Each medical doctor is required to complete 150 hours of continuing education in courses or programs approved by the board of which a minimum 75 hours of the required 150 hours must be earned in courses or programs designated as Category 1 programs. Other license requirements are listed here:

Controlled Substance Licenses

Opioids and Other Controlled Substances Awareness Training Standards for Prescribers and Dispensers of Controlled Substances

This is a one-time training that is separate from continuing education for an individual seeking a controlled substance license or who is licensed to prescribe or dispense controlled substances.

Licensees that prescribe or dispense controlled substances who renewed in 2019 must complete training by January 2023; renewals for 2020 by 2024, renewals for 2021 by 2025. Beginning in September 2019, completion of the training is a requirement for initial licensure.

Training content must cover all of the following topics:

- Use of opioids and other controlled substances.
- Integration of treatments.
- Alternative treatments for pain management.
- Counseling patients on the effects and risks associated with using opioids and other controlled substances.
- The stigma of addiction.
- Utilizing the Michigan Automated Prescription System (MAPS).
- State and federal laws regarding prescribing and dispensing controlled substances.
- Security features and proper disposal requirements for prescriptions.

Medical Licenses

Training Standards for Identifying Victims of Human Trafficking

A one-time training, separate from continuing education. Licensees renewing for 2017 must complete training by renewal in 2020; renewals for 2018 by 2021, and renewals for 2019 by 2022. Beginning in 2021, completion of the training is a requirement for initial licensure. Training content shall cover all of the following:

- Understanding the types and venues of human trafficking in this state or the United States.
- Identifying victims of human trafficking in health care settings.
- Identifying the warning signs of human trafficking in health care settings for adults and minors.
- Resources for reporting the suspected victims of human trafficking.

Education on Pain and Symptom Management

A minimum of 3 hours of continuing education every 3-year relicense cycle. At least 1 of the 3 hours must include controlled substances prescribing. Continuing education hours may include, but are not limited to, any of the following areas:

- Public health burden of pain.
- Ethics and health policy related to pain.
- Michigan pain and controlled substance laws.
- Pain definitions.
- Basic sciences related to pain including pharmacology.
- Clinical sciences related to pain.
- Specific pain conditions.
- Clinical physician communication related to pain.
- Management of pain, including evaluation and treatment and nonpharmacological and pharmacological management.
- Ensuring quality pain care and controlled substances prescribing.
- Michigan programs and resources relevant to pain.

Medical Ethics

A minimum of one-hour of continuing education every 3-year relicense cycle.

Implicit Bias

A minimum of 3 hours every 3-year relicense cycle. New licensees need 2 hours within the 5 years immediately preceding.

Renewals from June 1, 2022 - May 31, 2023, need 1 hour; renewals from June 1, 2023 - May 31, 2024, need 2 hours; renewals from June 1, 2024 - May 31, 2025, need 3 hours. Then after, every 3-year renewal cycle will need to report 3 hours. (Any hours after June 2021 can be used.)

Training must include strategies to reduce disparities in access to and delivery of health care services and the administration of pre- and post-test implicit bias assessments.

Acceptable modalities of training include asynchronous teleconference or webinars, in addition to live activities and live webinars.

Training content must include, but is not limited to, 1 or more of the following topics:

- Information on implicit bias, equitable access to health care, serving a diverse population, diversity and inclusion initiatives, and cultural sensitivity.
- Strategies to remedy the negative impact of implicit bias by recognizing and understanding how it impacts perception, judgment, and actions that may result in inequitable decision making, failure to effectively communicate, and result in barriers and disparities in the access to and delivery of health care services.
- The historical basis and present consequences of implicit biases based on an individual's characteristics.
- Discussion of current research on implicit bias in the access to and delivery of health care services.

Join GCMSA

Genesee County Medical Society Alliance

MISSION STATEMENT

To make a positive difference in the lives of Genesee County residents by promoting healthy lifestyles and education through partnerships with GCMS and local community organizations, as well as providing a supportive network to medical families.

Dues

$30 per year

Who We Are?

We are spouses of physicians who strive to make our county a better place for ourselves, our families, and our community.

Since 1938 GCMS Alliance programs and services have offered something for every physician's spouse. As a member, you have a voice in one of the most highly organized and involved health organizations in the community, the state of Michigan, and the nation.

What We Do?

- Involved in the Genesee County Free Medical Clinic Healing Hands 5K Run/Walk.
- Helps the GCMS in its legislative efforts for quality health care.
- Provides supplies to the YWCA women's shelter
- Raises funds for Peace Day & scholarships
- Organize social events such as international luncheons, book clubs, friendship gatherings, and more!

Get in Touch

661-645-2385

abauerPNP@gmail.com

http://www.gcmsalliamce.org

the.aliance.GCMSA

GCMS is focused on improving the future of medicine. Our resource's and meetings are a great way to learn about medical advancements and potential treatments. Click the link below for more information.

WWW.GCMS.ORG


— EST. 1929 —
G
1836
95 YEARS
GENESEE COUNTY
HEALTH DEPARTMENT

HEALTH OFFICER
Michelle Estell, RS, MSA

GENESEE COUNTY
HEALTH DEPARTMENT

MEDICAL DIRECTOR
Michela Corsi, MD, MPH, MA

3/4/2025

Important Update: MMR Vaccination Guidelines

We are deeply saddened by the recent death of a child in Texas due to measles, a disease that can be prevented through vaccination. This loss reminds us how important it is to protect our communities.

Texas is currently facing a measles outbreak with 146 confirmed cases as of February 28th. This situation is a stark reminder that measles is still a serious threat, even though it was thought to be eliminated in the U.S. in 2000.

Vaccines are our best defense against measles. The MMR vaccine, when given in two doses at the appropriate time, stops over 97% of measles infections. Our community is vulnerable, with an 81% MMR vaccination rate which is significantly lower than recommended rate for community immunity. This makes it one of our most powerful tools to keep people healthy.

To help our healthcare teams respond to this situation, we are sharing an important update on vaccination guidelines. This information will help us better serve and protect our community during this challenging time.

MMR Vaccination Guidelines

Presumed Immunity and Vaccination Recommendations:

- Adults born before 1957 are generally presumed to have immunity to measles, mumps, and rubella.
- Healthcare workers should receive 2 doses of MMR vaccine.
- Certain medical conditions may require 2 doses of MMR as per CDC guidelines.
- The minimum spacing is 28 days.

Special Considerations:

- Adults vaccinated in the 1960s with an inactivated or unknown type of measles vaccine should receive at least one dose of MMR.

Current Childhood Immunization Schedule:

- One dose of the MMR vaccine is 93% protective against measles.
- There is currently no need to deviate from the current recommended childhood immunization schedule.
- Children can wait until age 4 for the second dose, especially given no evidence of transmission in our community.
- One dose will also help protect against severe disease if infected.

Early Vaccination for Infants:

- There is no need to start vaccination earlier than age 1 given the current state of the outbreak. We will notify you immediately if this recommendation changes.

FLOYD J. MCCREE COURTS & HUMAN SERVICES CENTER | 630 S. SAGINAW STREET, SUITE 4 | FLINT, MICHIGAN 48502
BURTON BRANCH | G-3373 S. SAGINAW STREET | BURTON, MICHIGAN 48529
MAIN PHONE 810-257-3612 | WWW.GENESEECOUNTYMI.GOV

- CDC recommends that infants >6 months and <12 years who are **traveling internationally** should receive a dose of MMR vaccine prior to travel.
- Given the current outbreak, we recommend this dose for infants **traveling** with their parents to **West Texas**.
- Any dose given before 12 months does **NOT** count toward the MMR series (0 dose).
- Children will still need two doses following the normal childhood immunizations schedule.

Contraindications:
MMR and other live vaccines should NOT be given to individuals with:

- Pregnancy
- HIV infection with CD4 count <15% or <200m
- Severe immunodeficiency (consult with healthcare provider)
- Certain immunosuppressant medications, including:
  - High-dose steroids (≥2 weeks of daily 20 mg or 2 mg/kg body weight of prednisone or equivalent)
  - Specific biologics (e.g., Humira)
  - Chemotherapy
- Recent receipt of antibody-containing blood products (within past 11 months)

Additional Resources:

- Measles, Mumps, and Rubella (MMR) Vaccination | CDC
- Measles Preparedness Toolkit

We will continue to monitor the situation closely and provide updates as necessary. For comprehensive information on contraindications and precautions, please consult our Immunizations team or refer to official CDC guidelines.

Sincerely,

Michela Corsi, MD, MPH, MA
Medical Director, Genesee County Health Department

9:00 A.M.

****Via Zoom**

ATTENTION: PRACTICE MANAGERS IT'S ESSENTIAL NOW MORE THAN EVER THAT YOU JOIN US..

AND OFFICE STAFF!

Genesee County Medical Society addresses issues of concern for medical professionals!

Please join **GCMS and SOVITA** in monthly meetings for practice managers and office staff of *all member physicians*.

Please email executivedirector@gcms.org to RSVP,

YOU WILL RECEIVE A ZOOM INVITE

NEXT MEETING DATE:

MARCH 12TH, 2026— 9:00 A.M.

You do not want your Practice Manager to miss out on these valuable meetings!

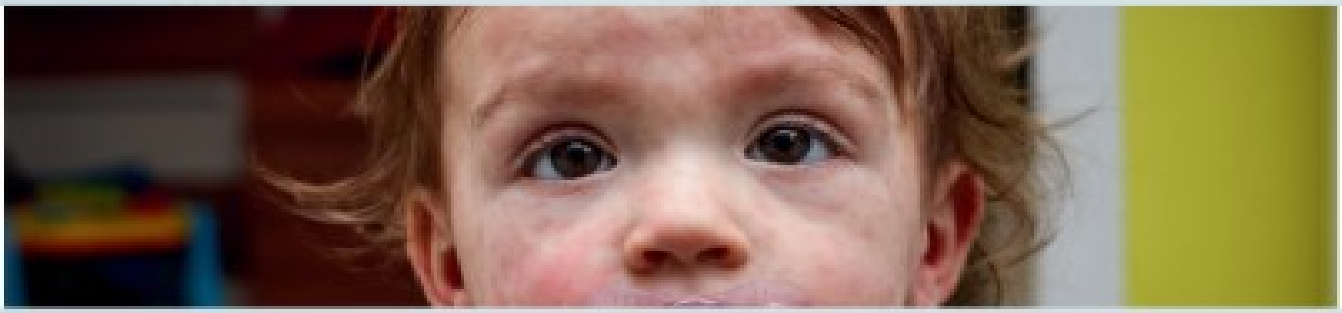
GENESEE COUNTY MEDICAL SOCIETY Established 1841

&

Sovita® CREDIT UNION

Click here for full guide

Measles Preparedness Toolkit



Health Care Providers Guide to In-Office Testing and Prevention

MDHHS

GENESEE COUNTY HEALTH DEPARTMENT

DISCONTINUATION-Measles-IgM Testing

Laboratory System Partner,

Effective immediately, the MDHHS Bureau of Laboratories (BOL) will no longer offer measles IgM testing due to a manufacturer kit recall. Specimens submitted for measles IgM testing will be forwarded to partner laboratories for testing.

Measles RT-PCR and measles IgG testing are not impacted and remain available at the BOL.

For questions regarding this change, please contact:

Virology Section Manager, Dr. Katie Margulieux, MargulieuxK@michigan.gov 517-335-8099, or

Viral Serology Unit Manager, Kristine Smith, SmithK8@michigan.gov 517-335-8100.

Table of Contents

Your Membership at Work

- GCMS hosts monthly Practice Manager's meeting discussing complicated insurance issues in round table discussions with various insurance companies. If you find on-going insurance issues, please reach out to GCMS staff at executivedirector@gcms.org and we can connect that insurance company representative with our hard working Practice Managers.
- GCMS staff helped Genesee County residents with contacts, resources and explanations.
- GCMS Membership Committee has collaborated and has a plan in place to reach out to and meet with various practices in Genesee County. If you have colleagues that are not yet GCMS members, please connect with them! **** A flyer of GCMS benefits can be provided to you.

CLICK HERE **For Daily Genesee County Covid-19 Numbers**

Coronavirus (COVID-19) Data Dashboard for Genesee County

CLICK HERE **For Reporting**

EMPLOYERS + SCHOOL ADMINISTRATORS:

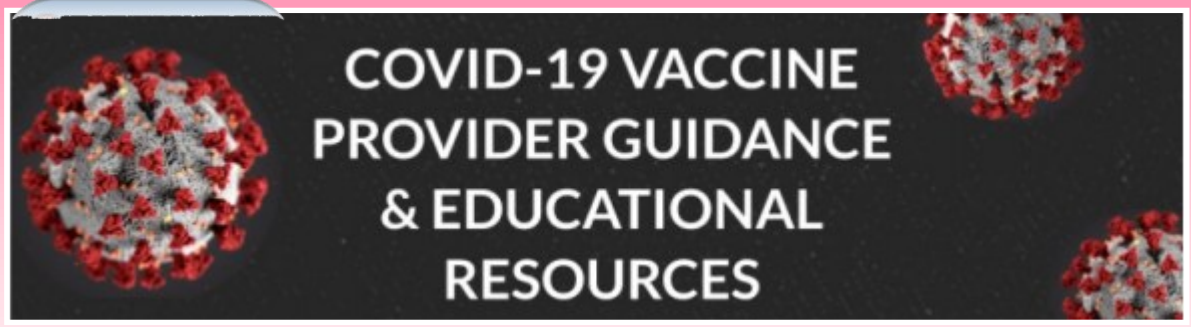
Do you need to report a laboratory-confirmed positive COVID-19 case?

Click the button to email the Communicable Disease team at GCHD-CD@gchd.us or call (810) 257-1017

CLICK HERE **For State of Michigan Covid-19 Information**

Michigan.gov

CLICK HERE



COVID-19 VACCINE

The COVID-19 pandemic demonstrates how diseases without vaccines can devastate economic and public health. Vaccines have reduced and, in some cases, eliminated many diseases. In the U.S., there is currently no approved vaccine to prevent COVID-19. MDHHS is working with the CDC and Michigan stakeholders to prepare and plan for when the vaccine is available. The initial draft of our state's plan is now available and will be updated often in the coming months. Visit regularly for the most recent information on the COVID-19 vaccine and Michigan's preparations.

COVID-19 VACCINE PLAN

CLICK HERE **COVID-19 VACCINE RESOURCES**

IMMUNIZATIONS DURING COVID-19

CDC FAQS

PROVIDER GUIDANCE & EDUCATION

NEW BENEFIT FOR MEMBERS!

GCMS can help YOUR PRACTICE meet the ADA requirements and provide impeccable services to your patients at a DISCOUNTED price!

GCMS is very pleased to announce a relationship with Luna Language Services.
Luna offers a number of different virtual options to assist physician offices with language interpretation services.
As an added benefit to your GCMS Membership, a discount is now offered to all GCMS members utilizing

Luna Virtual Language Services.
Please contact **David Hoff** Executive Director to register your office for discounted services.

Genesee County Medical Society Members receive a discount for language services!

LUNA Language Services

Interpreting Services

- On-site Interpreting
- Virtual Interpreting
- Phone Interpreting
- Video Remote Interpreting (VRI)
- Conference & Event Interpreting

To become a GCMS member, or to receive details about this discounted service Please contact :

ExecutiveDirector@GCMS.org


MSMS
NEW MEMBER BENEFIT!
FREE Continuing Medical Education (CME) for all active MSMS members beginning Dec. 2, 2024*
*Free CME begins 12/2/24. No refunds on any CME, including webinars, courses, trainings, online or in-person events registered for prior to 12/2/2024.
EXCITING NEWS
FROM THE MICHIGAN STATE MEDICAL SOCIETY...
MSMS
MICHIGAN STATE MEDICAL SOCIETY
NEW MEMBER BENEFIT!
The Michigan State Medical Society is excited to announce a significant enhancement to the benefits of membership. Beginning December 2, 2024, the Michigan State Medical Society (MSMS) will offer FREE Continuing Medical Education (CME) to all active members*.
MSMS aims to support the professional development of all Michigan physicians and ensure access to the latest medical knowledge and practices. MSMS offers a diverse range of educational offerings to help physicians stay informed and compliant with all licensure requirements in an ever-evolving health care landscape. This new membership benefit provides a value of more than $8000. MSMS invites you to deepen your impact and become engaged in the dynamic changes taking place in Michigan's medical landscape by becoming a member of MSMS.
Every physician in Michigan can make the most of this exciting new benefit by joining the Michigan State Medical Society today!
Call 517-336-5716
to enjoy the privileges of membership in the Michigan State Medical Society.
*Free CME begins 12/2/24, no refunds on any CME, including webinars, courses, training, online or in-person events registered for prior to 12/2/2024.

Easy Ways to Donate to the Medical Society Foundation:

The Medical Society Foundation is engaged in a Capitol Campaign. The purpose of the Campaign is to grow the corpus to support the charitable activities of the Genesee County Medical Society. Those activities include public and community health, support for the underserved, and wellness initiatives.

To continue its good work, the Medical Society Foundation is asking you to consider leaving a legacy gift to the Foundation. If all, or even a significant portion of our membership left just a small part of our estates to the Foundation, the Foundation could continue helping this community in so many ways, by supporting the Medical Society.

To make a gift, simply use these words:

In your Trust, "Grantor directs Trustee to distribute __% of all assets then held in Trust or later added to this Trust to the Medical Society Foundation, to be held in an endowed fund and used in the discretion of its then existing board of directors in furtherance of the purposes of the Foundation."

In your Will, "I give, devise and bequeath __% of my Estate to the Medical Society Foundation, to be held in an endowed fund and used in the discretion of its then existing Board of Directors in furtherance of the purposes of the Foundation."

While this is not a subject that is comfortable to broach, it is an opportunity to support the Foundation which supports the Medical Society's charitable activities on behalf of the membership. Please give. You can give via a trust or will. You can give from your IRA. You can give appreciated stock, and you can give cash. Please support the organization which does so much on behalf of the medical community and the patients we serve.

Don't Forget!

Donations are tax deductible!

Please contact GCMS at 733-9923 or email executivedirector@gcms.org

Do you have an advertising NEED?

- Are you a Physician **and** you are a member of GCMS and you have a new practice in Michigan?
- Do you have a medical practice **and** you are a member of GCMS and your office has relocated?
- Do you have a business that serves Michigan and business slow?

Let Genesee County Medical Society help!

Genesee County Medical Society Bulletin

(ONLINE MAGAZINE)

Your ad will be featured in the Genesee County Medical Society monthly bulletin that is provided to 1,500+ viewers. The Bulletin can also be found on the GCMS website, and is also published through Calameo virtual magazine. (HTTPS://En.Calameo.com/)

1/2-page ad $195/month

3/4-page ad $290/month

Full page ad $350/month

A link to the business website or email can be added for **NO** *additional* fee.

Click here to connect with GCMS, we can provide your advertising needs!

GENESEE COUNTY MEDICAL SOCIETY
Established 1841

**all ads placed by Physicians or Medical Practices must have a GCMS membership.

SAFEHAVEN™
PHYSICIAN AND PROVIDER WELL BEING PROGRAM

Rediscover meaning, joy, and purpose in medicine.

SafeHaven™ ensures that physicians and health care providers can seek confidential assistance and support for burnout, career fatigue, and mental health reasons.

- In-the-moment telephonic support by a licensed counselor, 24/7
- Legal and financial consultations and resources, available 24/7
- Peer Coaching—talk with someone who has walked in your shoes that can help you grow both personally and professionally
  - Six sessions per incident
  - Physician or provider chooses coach from a panel of coaches
- Counseling, available in either face-to-face or virtual sessions; addressing stress, relationships, eldercare, grief, and more
  - Six sessions per incident
  - Available to all extended family members
- WorkLife Concierge, a virtual assistant to help with every day and special occasion tasks, 24/7
- VITAL WorkLife App—Mobile access to resources, well being assessments, insights, and more

RESOURCES FOR YOU AND YOUR FAMILY MEMBERS

SafeHaven™ includes Well Being Resources from VITAL WorkLife—confidential and discreet resources designed to reduce stress and burnout, promote work/life integration and support well being for you and your family.

TO LEARN MORE, VISIT
www.MSMS.org/SafeHaven

To support the needs of physicians and health care providers struggling with stress, burnout, and the effects of COVID-19, the Michigan State Medical Society (MSMS) and VITAL WorkLife have partnered to offer a comprehensive set of well being resources and confidential counseling services for their use, SafeHaven™.

MSMS MICHIGAN STATE MEDICAL SOCIETY | VITAL WORK•LIFE

Commit to Fit provides nutrition, physical activity, and healthy food access programming throughout Flint and Genesee County with a focus on disadvantaged communities and a commitment to forging strong relationships with community-based organizations (CBOs) and residents. Its nutrition education combines the SNAP-Ed Fork and the Road and The Learning Kitchen interventions with the Cooking with Kids program, which demonstrates to residents of all ages how to eat healthily on a budget, how to incorporate produce unique to Michigan into their diets, and how small changes in what they eat can make huge differences in their health.

Commit to Fit Fitness Class Calendar

C2F - Greater Flint Health Coalition

Empowering Health in Genesee County

The power of partnership lies at the heart of the Greater Flint Health Coalition – a broad cross-sector collaboration between Flint and Genesee County's leadership including public health, physicians, hospitals, health insurers, safety-net providers, businesses, education, community-based organizations, non-profits, government, policymakers, labor, media, and local residents.

GREATER FLINT HEALTH COALITION

MEDICAL SOCIETY FOUNDATION

Did you know that all donations made to the ***Medical Society Foundation*** are 100% Tax-deductible? If you are interested in donating, or if you have any further questions, please contact

executivedirector@gcms.org Thank you!

LARA
LICENSING AND REGULATORY AFFAIRS

BUREAU OF PROFESSIONAL LICENSING

Mainstreaming Addiction Treatment Act/Medication Access and Training Expansion Act and Corresponding State Modifications

June 21, 2023

To all controlled substance licensees:

Most practitioners are now aware that Congress has passed the Mainstreaming Addiction Treatment (MAT) Act that removed the federal "DATA 2000" or "DATA-Waiver Program," and the Medication Access and Training Expansion (MATE) Act that established a one-time training on substance use disorder for practitioners who prescribe controlled substances when they obtain or renew their Drug Enforcement Administration (DEA) registration. In light of these changes, which are intended to educate practitioners and reduce barriers to obtaining medications for opioid use disorder (OUD) by eliminating burdens on providers who currently prescribe medications and new providers who wish to treat patients with OUD, the Bureau of Professional Licensing (BPL) would like to convey the following corresponding changes at the state level:

- The new DEA one-time 8-hour training requirement is effective June 27, 2023. Effective on this date, or the date on which the DEA requires the 8-hour training in the event the effective date is delayed, and until further notice, a practitioner required to attend a one-time opioid and controlled substances awareness training by the state's Controlled Substances Rules, may use the 8 hours of training that is accepted by the DEA for their controlled substances registration to also meet the state's required one-time training on opioids and other controlled substances awareness.

- In addition, R 338.3163 that limits prescribing, dispensing and administering a controlled substance to an individual with a substance use disorder will not be enforced by BPL until the rule is either modified or rescinded. This rule limited the circumstances under which a practitioner could treat an individual with substance use disorder, as well as the number of individuals that could be treated. All other laws and rules, both federal and state, must still be followed.

For more information about the elimination of the DATA-Waiver Program, and DEA's 8-hour substance disorder training, please refer to the following websites:

https://www.samhsa.gov/medications-substance-use-disorders/removal-data-waiver-requirement

https://www.deadiversion.usdoj.gov/pubs/docs/MATE_training.html

MATE_Training_Letter_Final.pdf (usdoj.gov)

Questions may be sent to BPLHelp@michigan.gov.

Thank you,

Bureau of Professional Licensing
Licensing Division

GENESEE COUNTY MEDICAL SOCIETY
Established 1841

CONNECT WITH US..

Genesee County Medical Society (GCMS) | Flint MI | Facebook

Wix | LinkedIn

WWW.GCMS.ORG

MSMS
MICHIGAN STATE MEDICAL SOCIETY

120 West Saginaw Street | East Lansing, Michigan 48823
517-337-1351 | msms@msms.org | www.msms.org

Application Code: _____

State and County Medical Society

MEMBERSHIP APPLICATION

Join MSMS and your County Medical Society online at www.**joinmsms**.org

Join GCMS/MSMS

Renew Membership

❍ I am in my first year of practice post-residency.
❍ I am in my second year of practice post-residency.
❍ I am in my third year of practice post-residency.
❍ I have moved into Michigan; this is my first year practicing in the state.
❍ I work 20 hours or less per week.
❍ I am currently in active military duty.
❍ I am in full, active practice.
❍ I am a resident/fellow.

❍ Male ❍ Female

First (legal) Name: _____ Middle Name: _____ Last Name: _____ ❍ MD ❍ DO

Nickname or Preferred Form of Legal Name: _____ Maiden Name (if applicable) _____

Job Title: _____

W Phone _____ W Fax _____ H Phone _____ H Fax _____

Mobile: _____ Email Address _____

Office Address ❍ Preferred Mail ❍ Preferred Bill ❍ Preferred Mail and Bill

_____

City: _____ State: _____ Zip: _____

Home Address ❍ Preferred Mail ❍ Preferred Bill ❍ Preferred Mail and Bill

_____

City: _____ State: _____ Zip: _____

*Please base my county medical society membership on the county of my (if addresses are in different counties): ❍ Office Address ❍ Home Address

*Birth Date: ____/____/____ Birth Country _____ MI Medical License #: _____ ME #: _____

Medical School _____ Graduation Year: _____ ECFMG # (if applicable) _____

Residency Program _____ Program Completion Year _____

Fellowship Program _____ Program Completion Year _____

Hospital Affiliation _____

- Primary Specialty _____ Board Certified: ❍ Yes ❍ No
- Secondary Specialty _____ Board Certified: ❍ Yes ❍ No

Marital Status: ❍ Single ❍ Married ❍ Divorced Spouse's First Name: _____ Spouse's Last Name: _____

Is your spouse a physician?: ❍ Yes ❍ No If yes, are they a member of MSMS?: ❍ Yes ❍ No

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, 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 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: _____

County Medical Society Use Only
Reviewed and Approved by: