

December 2014 Volume 93, Number 10

PRESIDENTS' BALL REVIEW
THOUGHTS ON EUTHANASIA
AMA UPDATE
IMG SECTION UPDATE
COMMUNITY DIABETES REGISTRY



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Read by 96% of GCMS members.

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Cover photo by Peter Levine, MPH

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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HAPPY HOLIDAYS TO EVERYONE

Last month, I attended two conferences in Florida. One on pain management, and one on prescribing

controlled substances. Both meetings were excellent updates, but the controlled substances conference was an eye opener. Of 19 participants, two were there because their partners suggested they go and 16 were instructed to attend by their state boards. I was the only one truly there for elective CME.

What I learned is that many state boards are really scrutinizing prescribing practices, not just narcotics and benzos, but stimulants for ADD and testosterone prescribing.

I have done a lot of study in pain management, and see a lot of these patients in my office, so I can

demonstrate to any board, or insurance company

that I am within my scope of practice. I feel that it is important to treat our chronic pain patients and applaud

> all of you who care for them. I would highly recommend that if you have not updated your CME in this area, that you would attend a course, review your prescribing habits, and most importantly, document your reasoning and monitoring. Be sure to use our MAPS system and do urine (drug) screening. Be proactive and stay out of trouble!

Finally, thank you to all who came to say adios to Dr. Ahmed and Polly, and to attend my coronation as Queen of GCMS. I wish I'd had more time to spend with you. If you couldn't make it, plan on next year!

And always – call me if I can help.



Deborah Duncan, MD



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EDITORIALLY SPEAKING

PHYSICIANS CANNOT IGNORE THE TOOTH

An apple a day keeps the doctor away; an onion a day keeps everyone away.

(American Saying)

Patients presenting to their physician for a routine physical exam are generally poked and palpated, percussed, penetrated and perused. The body is weighed, the blood pressure and pulse are measured, the ECG is recorded, possibly an X-ray is taken. Blood is drawn, urine is sampled, and the stool is specimened. That ought to do it. However, one very important area of the body human likely gets ignored during the typical physical, mainly because we doctors do not know (and do not want to know) much about it. That would be the oral cavity, dentition, the pearly

whites. It seems best to leave that realm to those other folks, the ones we met years ago in organic chemistry class as undergrads, before they went off to learn how to drill and fill and crown and bridge in dental school.

The value of good oral health is far more than an attractive smile and pleasant breath. Poor dentition and periodontal disease is associated with an overall poor quality of life from chronic pain to stroke, heart disease, and even low birth weight infants. Diabetes, heart and kidney disease, leukemia, and many cancers often have oral manifestations such as swollen gums, apthou ulcers, dry mouth, and gingivitis. Bacterial endocarditis can be caused by the systemic spread of oral infections. Tooth decay is one of the most common chronic diseases of childhood, five times more prevalent than asthma. Oral cancer is a world-wide problem generally attributed to tobacco and alcohol abuse. The dentist is often the first provider to discover serious health problems.

The burden of oral and dental disease is a growing problem, both in the U.S. and worldwide, frequently directly related to an unhealthy diet high in refined sugars and use of tobacco and abuse of alcohol. Access to good dental care is also an issue. In many developing countries, and among the poor and uninsured in the



Daniel Ryan, MD

U.S., the only treatment for dental problems is tooth extraction. Missing teeth make chewing difficult and can contribute to a poor diet and even malnutrition. Tooth loss affects speech, appearance, confidence, self-esteem, and a sense of well-being. It can interfere with finding and holding a job. There is an unfortunate but well-entrenched notion among certain cultures that tooth loss, like hair loss for men, is an inevitable fact of aging. Nothing could be further from the truth.

Dental care and dental insurance coverage rarely get the attention they

deserve, often taking a back seat to other health care issues. When adequate dental insurance is unavailable, basic and necessary routine care can be costly and tends to be neglected. Problems that could be prevented by early intervention become expensive and often painful for the patient.

Dentists are generally allies with physicians in educating patients about the adverse effects of tobacco and encouraging patients to quit smoking and chewing tobacco. Eighty-seven percent of dentists surveyed counsel their patients on the importance of eliminating tobacco to improve their oral and general health. Doctors should likewise be allies of our dental colleagues and discuss and stress the importance of daily dental care at home and routine visits to the dentist as part of the overall strategy for a



Medical Society Foundation

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

The Medical Society Foundation has been coordinating physician giving in Genesee County since 1987. This holiday season, why not use the Foundation to make sure your gifts to family,

friends and colleagues help to improve the health and well-being of our community.

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

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

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

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

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

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

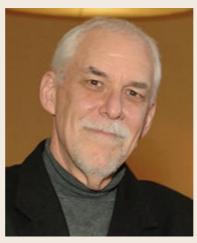
EXECUTIVE DIRECTOR'S MESSAGE

THANKS FOR ALL WHO HELPED WITH THE BALL!

As I write this, our Presidents' Ball was only a few days ago. It really was fun, and those who came had a very good time. The theme was Wild, Wild West and the mood was jovial. We were treated to an Alliance President singing to the Medical Society President. We were entertained by fiddler Neil Woodward, and we saw the only spaghetti western video filmed by an Indian director, starring a Bangladeshi cowboy riding an Arabian horse.

Each year when we hold the Ball, I
am touched by the incredible job that the
Alliance does in planning it. Once again,
JoyDawn Hardman and Anjali Misra chaired
the Ball Committee with the magnificent
support of Jeanette Rivera, Maria McCann, Raquel Yapchai,
Ruqsana Ahmed, Pete Levine and Sherry Smith.

We sincerely appreciate all of our sponsors who helped out with supporting the Ball. Without all of you



Peter Levine, MPH

it would not have been possible. In addition, we appreciate everyone who attended. Somehow it seems like there is too much serious stuff going on in the medical community these days. There needs to be more fun. If you have any good ideas for events that we can all participate in, please bring them to our attention. During this fiscal year we had a wonderful event at the Flint Cultural Center for young physicians and residents. We also had a terrific picnic for over 100 medical family members hosted by Shafi and Polly Ahmed on their farm. We also did some deadly serious stuff, but

clearly, people enjoy the fun more than the deadly serious. Here's to a great holiday season, full of fun, family, warm thoughts and feelings.

HURLEY MEDICAL CENTER PEDIATRIC ONCOLOGY UNIT Coordinated Care, Close to Home 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 Medullobastoma 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 carne 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. HURLEY HURLEY LIVING CONTROLOGY UNIT

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.

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

The GCMS Bulletin GCMS.ORG DECEMBER 2014

SGR, Ebola, MOC, and Unionization Discussed at AMA Interim Meeting



The Michigan Delegation to the AMA House of Delegates discussed, debated and acted upon on a number of critical health care issues during the AMA Interim meeting on Nov. 7-11 in Dallas.

Some of the topics included SGR repeal, Ebola, meaningful use, maintenance of certification, e-cigarettes, and physician unionization.

Serving at the AMA Interim Meeting from the Michigan Delegation were Betty Chu, MD, MBA, from Oakland County, and Bassam Nasr, MD, MBA, from St. Clair County, both of whom served on the Reference Committee F regarding AMA finances. John Bizon, MD, served as a teller.

Hot topics at the AMA Interim Meeting included the following.

SGR REPEAL: The AMA's lead lobbyist and two U.S. Congressmen told the House of Delegates that repealing and replacing the flawed Sustainable Growth Rate formula in this fall's lame duck session of Congress is the best opportunity for a fix. Texas Congressman Michael Burgess, MD, said "we are in extra innings," but there remains bipartisan, bicameral support to fix the SGR. His fellow Texas Congressman Kevin Brady said the difficulty remains the "pay fors," in other words, what will be cut in the budget to pay for the \$150 billion fix. AMA lead lobbyist Richard Deem said Michigan Congressmen Fred Upton and David Camp have pushed the legislation to the point that "we are closer than ever." However, he noted that "legislation is the art of compromise, but this (fix) is a clear improvement over current law." He said a "patch 18" would be unacceptable to the AMA. Deem also noted that the AMA will work to repeal the Independent Payment Advisory Board in the next legislative session.

EBOLA: A leading expert on Ebola from the CDC told the House of Delegates in a special two-hour educational session that "ultimately, the best way to protect the U.S. is to stop the outbreak in Africa." Details about diagnosing and treating patients as well as protecting health care workers were provided. The House later discussed four resolutions regarding Ebola and combined them into one that called for support of global efforts to fight Ebola and other epidemics and pandemics and to work to ensure that quarantine interventions are based on science and not politics or emotion. The House also committed the AMA to being a trusted source for dissemination about all information regarding Ebola on its Ebola Resource Center at www.ama-assn.org. Ebola information is also available on the MSMS website at www.msms.org/ebola.

MEANINGFUL USE: A very popular resolution among delegates about electronic health records called for the AMA "to continue to advocate that the Centers for Medicare & Medicaid Services suspend penalties to physicians and health care facilities for failure to meet Meaningful Use criteria." Testimony emphasized the fact that the meaningful use

program remains a significant cost and disruption to physicians and that EHRs are not yet capable of exchanging health care information across different systems.

MAINTENANCE OF CERTIFICATION: Four resolutions about various aspects of Maintenance of Certification engendered significant, strong discussion in reference committee and on the floor of the House regarding the balance between the costs and burdens of MOC versus maintaining physician competence and public trust. A combined, substitute resolution was adopted that called for the AMA to add a number of amendments to its current Principles on MOC to use when in discussions with the American Board of Medical Specialties including cost, relevance, and design. Also added was that MOC should not be a mandated requirement for licensure, credentialing,



reimbursement, network participation, or employment, as well as to eliminate the practice performance assessment modules. The AMA Council on Medical Education will send a report back to the AMA House of Delegates at the Annual meeting in June 2015.

E-CIGARETTES: Three resolutions were combined with a new report from the AMA Council on Science and Public Health that called on the AMA to support legislation to set 18 as the minimum age for buying and using any e-cigarette product, to prohibit the use in any health care setting, and to apply the same restrictions as those on tobacco for marketing and sales including a prohibition on television advertising.

PHYSICIAN UNIONS: A resolution calling for the AMA to conduct a study about physician unionization was adopted after arguments on both sides of the issue were aired. On the con side, some delegates argued that the only way unions are effective is through work stoppages and that medical ethics outlaws such activity by physicians. On the pro side, the argument was made that the number of employed physicians in all practice settings has increased significantly since the last time the AMA studied this issue in 2001. A new AMA study will be conducted, but a timeframe for reporting back was not immediately set.



The GCMS Bulletin GCMS.ORG DECEMBER 2014 11

PRESIDENT'S BALL

Presidents' Ball Comments by GCMSA President, Rugsana Ahmed

Good evening, dear GCMS and GCMS Alliance members, President Dr. Shafi Ahmed, Dr. Deb Duncan, Executive Director Pete Levine and honorable guests.

On behalf of GCMS Alliance, I would like to welcome you, to the President's Ball, which is our most prestigious and traditional event each year.

I'd like to go over some of the activities we all took part in during the year so far. These activities ranged from dealing with socially important issues to fun activities.

Speaking of socially important issues, let me first speak of the work we did with Senators Judy Emmons and Dave Robertson for Senate Bills 586 and 596. Senate Bill 586 was about preventing prosecution of underage girls who have been already used by human traffickers, so that we not only stop the abuse, but hopefully encourage girls in this sad situation to come forward. The reason for mentioning this issue at this happy time is to make more people aware of this issue, and prevent this from happening to girls in our own community.

At our October Human Trafficking meeting this year, one of the victims who had been rescued, moved many of us to tears when she spoke to us. Both Senators Judy Emmons and Dave Robertson were there.

Each year we participate in the Peace Day Celebration and donate money to the Peace Day Committee. This year our Alliance donation money was used to support the Children's Poetry Competition.

Talking of fun activities, we had a picnic this summer with our families. There were paddle-boats, horse riding and games both for adults and children. We all had a lot of fun. Although most of us work, we ladies also found time to enjoy an International Luncheon, just as the days started getting shorter in September.

This month's meeting was about prevention & awareness of health issues with Dr. Parul Sud. We also had "bachata" dancing with Jeanette Rivera, in order to get more fit.

Next month we will be donating some gifts for those children unlucky enough to be in the hospital around Christmastime.

Future activities in 2015 will include discussions about investments and taxes, an author who will review her book, an evening of ballroom dancing instruction, a fashion show and the Annual Geranium Luncheon.

This is the second & last year of my presidency of the GCMS Alliance. I really appreciate our Alliance Board and Committee members. Thank you all who have helped us achieve so many of our goals.

I would like to thank the Ball Committee, for their hard and endless effort in making this event successful. Anjali Misra, JoyDawn Hardman, Maria McCann, Raquel Yapchai, Jeanette Rivera, Sherry Smith, Pete Levine and Bobby Mukkamala. You all are awesome.

I thank you all for coming to the President's Ball and making this evening so much more enjoyable. Your support is truly appreciated. Thank you.





WE'VE GOT A NEW SHERIFF IN TOWN!

The theme of the 2014 Presidents' Ball was the Wild, Wild West. It featured the fiddling virtuosity of Neil Woodward, the accomplished singing voice of Ruqsana Ahmed, and a spaghetti-western themed video featuring Dr. Shafi Ahmed, acting as sheriff of Genesee County Medical Society, announcing there's a new sheriff in town. The event also featured the installation of Deborah Duncan MD, as President of the Genesee County Medical Society. In addition, the event was attended by several past Presidents of the Medical Society and the Alliance, who were introduced to the audience to applause. The past Alliance Presidents included Vibha Kaushal, Beth Schumacher, and Cheryl Thoms. The past Presidents of GCMS included: Drs. Peter Thoms, Ed Gullekson, S. Bobby Mukkamala, AppaRao Mukkamala, Venkat Rao, Hesham Gayar and Shafi Ahmed.

The Ball Committee was ably chaired once again by Anjali Misra and JoyDawn Hardman. The Ball Committee included Jeanette Rivera, Maria McCann, Raquel Yapchai, Ruqsana Ahmed, Pete Levine and Sherry Smith.

The Wild, Wild West themed decorations were designed and provided by Vogt's Flowers. Genesys Conference & Banquet Center hosted the event with terrific service and food provided by Collene Eller and her staff from Epoch Catering. The spaghetti western featuring Dr. Shafi Ahmed was produced by Dr. Vivek Palavali. In it. he introduced the new sheriff, Dr. Deborah Duncan, who greeted all of those present with a series of laughter inducing comments, as well as a sense of humor about having been elected President. Dr. Pino Colone was introduced as the new President Elect. None of us can wait to see what the Presidents' Ball theme will be next year, when Dr. Duncan has influence on this event.

Prayer Written for the GCMS President Ball 2014

Heavenly God, you are in no way a stranger to this audience. In their everyday work, they see your hand interwoven with the intricacies of the structure and function in the human body. They discover and share the natural laws you have laid down for our tissues to follow. They endeavor to find new secrets in tiniest particles of life in your creation, and there they see with their own eyes your footprint and your wisdom as was at the beginning, now, and forever.

They witness in their own hands the miracles

of cure that they confess is beyond the effects of their interventions or expectation. Open their eyes to yet other secrets buried deep in our veins, bones or cells everywhere. Grant them plenty in prudence. Reveal to them the limits of their grasp and knowledge. Favor them a plethora of compassion they need to feel the pain of all your children with no exception whether in the body, mind or soul.

We ask all these in your Almighty name... Amen.

Written by Cyrus Farrehi. Past President, Nov 2014.

GCMS President, Dr. Shafi Ahmed's Farewell Speech November 15, 2014

A year ago you trusted me to carry the baton of this great Society. Looking back over the list of the great leaders who have served in this position, I feel humbled. It was impossible for me to fill their shoes. I only tried to dance around in their shoes for the last year. I can tell you, it was an exciting experience. I am happy to report that this vibrant Medical Society, the best and most active in Michigan, has kept its mantle.

As physicians we work to deliver the best care to our patients on an individual basis each and every day. That is what we are trained for, and that is what we took our oath for.

Today the changes we are experiencing across the health care industry, (yes, it is now an industry, not a profession and we are health care providers, not the doctors we used to be) are unprecedented. Others are trying to replace us as the patient's advocate. Hospitals have hired patient advocates to protect the patient's interest. Insurance companies dictate the tests and medications we can prescribe. Case managers will dictate how long a patient can stay in the hospital.

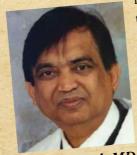
With so much change taking place and with so much at stake, the primary question we need to ask ourselves is, can we sit on the sidelines and let others shape the future of our great profession and our patients?

Repeated surveys have shown that patients trust their doctors the most when it comes to their health care decisions. Are we keeping the trust of our patients?

Sadly, in a time when the doctors need to stick together, we see organized medical organizations across the nation experiencing their lowest membership rates. Our county organization is not the exception, but I am happy to report that our rate of membership is still one of the highest in the state.

Last year, your Medical Society took the lead to support and elect the Supreme Court judges who support the rule of law and uphold the tort reforms, which are critical to our present and our future. Our Legislative Liaison Committee regularly sits with our state and federal lawmakers to update them on our concerns regarding health care issues and our patient's interests.

Your Society regularly convenes office manager



Shafi Ahmed, MD

meetings and helps them navigate through the ever changing health care maze. We have organized our business meetings to help physicians and their office staff to get prepared for ICD-10. When BCBS wanted to introduce the unfair Advance Beneficiary Notice Policy, we took the matter to the proper authority and were able to reverse the policy. We are at the table of the Greater Flint Health Coalition to promote the health of our neighborhoods. Our Alliance is taking

a leading role in the fight against human trafficking. This year, for the first time, we organized a "Flint Cultural Center Event" to introduce this hidden jewel of our city to the medical students, residents and new physicians to promote retaining them in the community.

If you have resigned yourself to the current state of health care, I can tell you that this is a very exciting time to get involved in organized medicine. This is the time to make a real difference that can affect the future of health care for years to come.

At the end, I want to thank my wife, Ruqsana Ahmed. Without her support and understanding, I would not be able to do what I do. My two children are here. Nabila came all the way from Chicago, and Sajeed made some time in his busy schedule. Thank you very much. I also want to acknowledge the people at my table. My partner, Dr. Thoms and his wife, Dr. Mahmudur Rahman from Ann Arbor and his wife, Dr. Jamal Akbar from Saginaw and his wife, Dr. Safiul Hasan from Bloomfield Hills, and Dr. Ahmadul Hasan from Gross Point. Special thanks to Dr. Palavali. Despite his busy schedule, he made some time on a week day to keep his word to convert this brown boy into a cowboy. I can't thank you more. Last but not least, I want to acknowledge the help and guidance I received from our Executive Director, Pete Levine. Without his help, I would not have been able to get any thing done.

Thank you all, enjoy the evening.

GENESEE COUNTY MEDICAL SOCIETY ALLIANCE

PAST PRESIDENTS

(Names in red indicate Presidents of MSMSA)

1939 Lena Jenkins

1940 Loretta Curtin

1941 Marguerite Hubbard

1942 Grace Gelenger

1942 Florence Thompson

1943 Duffield Kretchmar

1944 Brenice Wright

1945 Ellen MacDuff

1946 Helene Smith

1947 Betty Shantz

1948 Sarah Harper

1949 Rita MacGregor

1950 Evelyn McLeod

1951 Alice Branch

1952 Marian Barbour

1953 Berneda Farhat

1954 Rose Anthony

1955 Marie Griffin

1956 Ellen Sparks

1957 Stella Kaufman

1958 Kay Billings

1959 Mra Schultz

1960 Genevieve Baird

(Sandberg)

1961 Marge Eichhorn

1962 Elaine MacArthur

1963 Geneva Beyer

1964 Ida Dawson

1965 Janice Varney

1966 Mary Lou Schwartz

1967 Chastine Mangelsdorf

1968 Jean Livesay

1969 Mary Lou Mathias

1970 Betty Wade

1971 Evelyn Dykewicz

1972 Ruth Estfon

1973 Mary McAlindon

1974 Ann Coriasso

1975 Margaret Rabiah

1976 Margaret Bonet

1977 Beverly Price

1978 DeLourde LaVielle

1979 Mary Turcke

1980 Lesley Canada

1981 Mary Tauscher

1982 Marilyn Lindman

1983 Bobbi Schoolfield

1984 Judith McLeod

1985 Lila Esfahani

1986 Clarice James

1987 Lolly Stoler

1988 Sharon Bailey

1989 Karen Sherrin

1990 Kathryn Uebelhart

1991 Ginny Sturm

1992 Katie Moghtassed

1993 Zaria Simoni

1994 Lorraine Edelen-Stevens

1995 Carol Batdorf

1996 Deborah Pack

1997 Katherine Cox

1998 Carmen Villegas

1999 Jay Kommareddi

2000 Sunny Dass

2001 Susan Bhagat

2002 Tammy Bruening

& Darcy Ojeda

2003 Lakshmi Tummala

2004 Marianne Almeida

2005 Kee Kang

2006 Chervl Thoms

2007 Rula Ali-Bakr & Liesbeth

Fernandez

2008 Beth Schumacher

2009 Elizabeth Jordan

2010 Velynda Makhene

2011 Rosa Wang

2012 Oya Agabigum

2013 Ruqsana Ahmed

& Vibha Kaushal

2014 Ruqsana Ahmed

GENESEE COUNTY MEDICAL SOCIETY

(Names in red indicate Presidents of MSMS)

1841 J.A. Hoyes 1866 R.D. Lamond 1867 H.C. Fairbank 1871 D. Clarke 1878 H.P. Seymour 1879 A.A. Thompson 1890 B. Cogshall 1902 C.S. Wheeler 1903 J.F. Rumer 1904 A.S. Wheelock 1905 H.W. Graham 1906 A. Goodfellow 1907 L.J. Locy 1908 N. Bates 1913 M.S. Knapp 1914 B.E. Burnell 1916 J.W. Handy 1917 J.G.R. Manwaring 1918 C.H. O'Neil 1919 H.E. Randall 1920 I.W. Orr 1921 F.B. Miner 1922 C.D. Chapell 1923 W.H. Winchester 1924 A. Patterson 1925 F.E. Reeder 1926 W.H. Marshall 1927 O.W. McKenna 1928 J.C. Benson, Sr.

1929 D.D. Knapp

1931 R.S. Halligan

1933 R.S. Morrish

1930 L.L. Willoughby

1932 J.C. MacGregor

1934 C.P. Clark 1935 R.D. Scott 1936 A. Thompson 1937 R. Mc.Arthur 1938 L.M. Bogart 1939 G.R. Goering 1940 C.W. Colwell 1941 D.R. Wright 1942 J.R. Curtin 1944 J.T. Connell 1945 D.R. Brasie 1946 W.Z. Rundles, Sr. 1947 F.D. Johnson 1948 H.H. Hiscock 1949 I.H. Gutow 1950 M.S. Chambers 1951 W.W. Stevenson 1952 A.C. Pfeifer 1953 Fleming Barbour 1954 E.P. Griffin, Jr. 1955 L.O. Shantz 1956 O.I. Preston 1957 C.K. Stroup 1958 Jackson Livesay 1959G.E. Anthony 1960 F.W. Baske 1961 H.B. Elliott 1962 I.B. Rowe 1963H.E. Branch 1964 L.G. Bateman 1965 J.E. Wentworth 1966 J.C. Benson, Jr. 1967 H.M. Golden 1968 Donald Bryant

1969 A.R. Sirna 1970 J.F. Dooley 1971 R.L. Rapport 1972 G.E. Moore 1973 Walter Rundles, Jr. 1974 L.E. Simoni 1975 R.I. Rathburn 1976 Allen Turcke 1977 C.E. Hurd 1978 Vivian Lewis 1979 John MacKenzie 1980 Richard McMurry 1981 F.V. Wade 1982 Richard Dykewicz 1983 Edwin Gullekson 1984 George Greidinger 1985 Robert James, Jr. 1986 Willys Mueller, Jr. 1987 Charles Thompson 1988 Archibald Piper 1989 Jack Tauscher 1990 Siavosh Variavandi 1991 Cathy Blight 1992 Virgil Villarreal 1993 Robert Soderstrom 2004 Sudarsan Misra 1994 AppaRao Mukkamala 2011 Billie Lewis 1996 Samuel Dismond, Jr. 2014 Jagdish Shah 1997 Kenneth Jordan 1998 Ali Esfahani 1999 Cyrus Farrehi 2000 Michael Boucree 2001 Abd Alghanem 2002 Peter S. Thoms

2004 Lawrence Reynolds 2006 Prasad Kommareddi 2007 Hesham Gavar 2008 Suresh Anne 2009 John Waters 2010 Venkat Rao 2011 S. Bobby Mukkamala 2012 Laura Carravallah 2013 Raymond Rudoni 2014 Shafi Ahmed Past President's For a Day 1959 H. Cook

1967 I.E. Leach 1976 C.J. Scavarda 1984 C.B. Kimbrough 1985 S.S. Gorne 1986 E.V. Golden 1990 A.L. Tuuri 1991 R. Ormond 1995 R.C. Gumpper 1996 J.R. Price 2002 John Reid 2003 Kalyani Misra 1995 Robert Rosenbaum 2013 Amitabha Banerjee **Donald Canada**

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Euthanasia PERFORMED IN BELGIUM

Written by Pete Levine

In Belgium, it is legal to perform euthanasia on people. Recently, a convicted rapist in Belgium, was granted the right to be euthanized because of his unbearable suffering over what he had done. He was declared self-aware and lucid. Last year, twin brothers who were deaf, were euthanized, because of their concern about going blind. Last year, a transsexual was euthanized in Belgium, because of the unbearable psychological and physical suffering he experienced throughout his childhood and his "failed" sex-change operation.

Since Belgium legalized euthanasia in 2002, one doctor has specialized in the field of euthanasia. He is, Dr. Wim Distelmans, who has begun euthanizing patients due to their psychiatric pain. In an article in the Canadian National Post, entitled "Death by Doctor" dated November 22, 2013, Dr. Distelmans acknowledged there were more "borderline" cases that the public never hears about.

In 2003, 235 individuals were euthanized in Belgium. In 2012, 1,432 were euthanized. In his interviews, he speaks openly about ending not only physical suffering, but also psychological and "existential" suffering. He has euthanized patients from Germany, Austria, France, the United Kingdom and United States.

The Canadian Medical Association has recently softened its stance on assisted suicide. On August 22, 2014, the Globe and Mail carried an article on this topic. The Delegates at the CMA National General Council, which is the equivalent to the AMA House of Delegates, now "supports the right of all physicians within the bounds of existing legislation, to follow their conscience when deciding whether to provide medical aid in dying."

In June of this year, Quebec became the first province in Canada to adopt "right to die" legislation. Among Canadian physicians, 44.8% think physician assisted death should be legalized, while 41.7% think it should remain illegal. The balance of 13.5% are undecided. 70% of Canadians support legalization of physician assisted death. In the August 22 article, a senior policy advisor with the Royal Dutch Medical Association noted that, since physician assisted death became legal in 1973 in Holland, 140,000 annual deaths take place, with fewer than 3,800 being physician assisted deaths.

It is interesting to note, that these actions are being taken in a few countries, with virtually no discussion taking place in this country regarding physician assisted death.



FREE COMMUNITY DIABETES REGISTRY

AVAILABLE FOR GENESEE COUNTY PHYSICIANS TO UTILIZE IN THEIR MEDICAL PRACTICES

Today's changing health care environment is a challenge for physicians. Physicians are having to shift from providing episodic care to focusing on better management of chronic disease conditions and improving population health. Physicians' earnings are being linked to federal mandates such as meaningful use, as well as the health of their patients through pay-for-performance programs. Utilization of a disease registry will assist physicians with disease management, patient education, patient centered medical home (PCMH) requirements, meaningful use, and physician incentive payments.

There is a difference between electronic medical records and (EMRs) and disease registries. EMRs are data storage tools and disease registries are tools to use data. Most EMR vendors promote misleading assurances that their products provide disease registry capabilities. Too often, practitioners have discovered, after-the-fact, that their EMR systems do not have a built-in registry or that a registry is a costly add-on. So how can primary care practices track and monitor data to improve the care of patients with chronic conditions if their EMR does not have this function? The Greater Flint Health Coalition's Group Visit Project's Community Diabetes Registry offers a no-cost solution.

The Group Visit Project's Community Diabetes Registry is a free, HIPAA-compliant, web-based database that captures patient demographic and

20

diabetes care measures. It allows for the identification, tracking, and monitoring of individuals with diabetes at the patient, provider, and practice level. The Community Diabetes Registry produces a number of valuable reports including:

- printed point of care patient reports to remind practitioners of needed tests and interventions as well as record keeping responsibilities;
- printed patient progress reports or report cards to provide information and education about patient improvement or areas of concern;
- exception reports to identify patients due for care and those whose results are not in acceptable ranges; and
- stratified population reports to look at patient outcomes for a provider or across a practice.

Getting started with a registry requires a good amount of data entry. To assist practices in implementing the Community Diabetes Registry, the Greater Flint Health Coalition's Group Visit Project has secured limited resources to help practices with data entry. For a demonstration of the Community Diabetes Registry or to learn more about integrating this free tool into your practice, please contact Lori Kunkel, Vice President of Programs at the Greater Flint Health Coalition by phone at (810) 232-2228 or email at gfhc@flint.org.



Genesee County Medical Society

Annual General Membership Meeting Presidents' Ball November 15, 2014

MINUTES

I. Call to Order

The meeting was called to order in the Grand Ballroom of the Genesys Conference & Banquet Center at 7:30pm.

Dr. Shafi Ahmed, GCMS President, thanked the Ball Committee and his wife for putting together such a wonderful Ball, and for support during the year.

He introduced each of the Ball Committee members, JoyDawn Hardman and Anjali Misra as Co-Chairs, Jeanette Rivera, Maria McCann, Raquel Yapchai, Ruqsana Ahmed, Peter Levine, and Sherry Smith. He also recognized the GCMS and GCMSA Boards.

He then thanked all of the sponsors:

Platinum Level

Fenton Medical Center

Gold Level

Genesys Regional Medical Center Hurley Medical Center McLaren Regional Medical Center

Bronze Level

Asthma, Allergy & Immunology Center Blue Cross Blue Shield of Michigan Health Alliance Plan of Michigan Health Plus of Michigan Dr. & Mrs. Michael McCann Singh & Aurora Oncology/Hematology Urological Services

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Donation Level

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Dr. Ahmed also thanked Josh Richmond, MSMS Senior Director, for attending.

II. Introduction of Alliance President

Dr. Ahmed introduced Rugsana Ahmed, President of the Genesee County Medical Society Alliance.

Mrs. Ahmed reviewed the activities of the Alliance over the course of the year, and thanked everyone for attending the Ball. (Her comments can be read in their entirety in this issue of The Bulletin.)

III. Finance Report

Motion: that the budget prepared for the fiscal year 2014-2015 be approved as presented. The motion carried.

IV. Elections

Motion: that the Slate of Nominees for GCMS positions, ratified at the September Dinner Business Meeting, and published in the August Bulletin, be approved as presented. The motion carried.

Dr. Ahmed thanked Drs. Paul Lazar and Sreen Mannam for their participation on the Board over the past several years and for their service to the physicians in the community. He also welcomed Drs. Rama Rao and Sunil Kaushal to the Board of Directors.

Finally, he congratulated Dr. Pino Colone for his election of President Elect.

V. Installation of New President

Dr. Venkat Rao was called to the podium as senior member of the Michigan State Medical Society Board of Directors to administer the oath of office to Dr. Deborah Duncan as President.

Dr. Duncan made a few comments, introducing her year as President.

Dr. Shafi Ahmed was called back to the podium to receive his gavel and gavel holder plaque as a representation of his peers' recognition of his leadership role. Dr. Ahmed thanked GCMS Board of Directors, his family, and GCMS staff, for their commitment over the past year, and wished Dr. Duncan well in her presidency. (His comments can be read in their entirety in this issue of The Bulletin.)

The assembled masses were then treated to a video produced by Dr. Vivek Palavali, in which Dr. Ahmed turned over the reins of the organization to the "new sheriff in town", Dr. Deborah Duncan.

VI. Adjournment

No further business appearing, the meeting was adjourned.

Respectfully submitted,

Peter Levine

Executive Director



IMGs LEARN SKILLS, OBTAIN RESOURCES, AND RECEIVE INSPIRATION AT SYMPOSIUM

More than 30 international medical graduates attended a free networking and educational event for medical students, ECFMG-certified individuals, residents, and physicians Oct. 25, presented by the AMA and MSMS at the Somerset Inn in Troy.

Those attending learned about AMA-IMG Section resources, the Michigan Conrad 30 Program, and how to successfully navigate the match. About half of those attending also participated in mock residency interviews.

The event was moderated by MSMS IMG Section Vice Chair Mona Hardas, MD, a Flint obstetrician/gynecologist.

Inspiration to those attending was provided by Busharat Ahmad, MD, the founder of the Michigan and AMA IMG Sections. He urged those attending to "never give up" their dreams and aspirations to attain a residency position.

More resources and information for IMGs can be found at http://www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/international-medical-graduates/about-us.page?



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YOUR **\$\$\$** AT WORK

- GCMS has convened a Task Force on C-sections to look at county-wide C-section rates
- GCMS & GCMS-A successfully held the Presidents' Ball on November 15th
- GCMS has transitioned Presidents, from Dr. Shafi Ahmed, to Dr. Deborah Duncan
- GCMS is in the process of creating three new Resolutions regarding environmental concerns, as well as concerns relating to non-physicians preforming testing and immunizations
- GCMS is working closely with MSMS for passage of Senate Bill 596, which would create a Health Care Board on human trafficking
- GCMS is working closely with MSMS to continue to block Senate Bill 2, which would expand nursing scope of practice

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The Medical Society Foundation has been coordinating physician giving in Genesee County since 1987. This holiday season, why not use the Foundation to make sure your gifts to family,

friends and colleagues help to improve the health and well-being of our community.

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

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

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

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

Mail your donations to: Medical Society Foundation

4438 Oak Bridge Drive, Suite B

Flint, MI 48532-5467

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

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

HAPPY BIRTHDAY DOCTOR

DECEMBER

Samiullah Sayyid, MD	1	Ureddi Mullangi, MD	11	Rao Botta, MD	22
Piyush Patel, MD	1	Randy Hicks, MD	12	Peter McLeod, MD	23
Basim Towfiq, MD	3	Tejal Joseph, MD	12	Sukamal Saha, MD	23
Sridhar Rao, MD	3	Yogesh Jagirdar, MD	12	Russell Becker, DO	23
Sumathi Mukkamala, MD	4	John Martin, DO	14	Abd Alghanem, MD	25
Paul Lauber, MD	5	Edward Stack, MD	17	Robert Michels, MD	27
Randall Sturm, MD	5	Nimrod Golovoy, MD	17	Mohammad Ashraf, MD	27
Eduardo Reyes, MD	7	F. Dale Roth, MD	18	Haesook Kim, MD	28
Miriam Pellerito, MD	7	Paula Rudoni, MD	18	Saqib Hasan, MD	28
Vaibhav Sahni, MD	7	Jack Benkert, MD	19	David Eilender, MD	29
Shaheen Sheikh, MD	7	Gagandeep Singh, MD	19	Paul Schroeder, MD	30
Stephen DeFriez, DO	8	Mohamed Ibrahim, MD	19	Leon Friedman, MD	30
Mary Marshall, MD	9	Samasandrapalya		Evelyn DelRosario, MD	30
Mona Hanna-Attisha, MD	9	Kiran, MD	20	Ahmed Hamoda, MD	31
Lily Lim, M	10	Elna Saah, MD	20		
Frank White, MD	11	Siavosh Varjavandi, MD	22		

GCMS MEETINGS

— December 2014 —

Legislative Liaison Committee, 12/1 8:00am, at the GCMS offices

Bulletin Committee, 12/3 7:30am, at the GCMS offices

Ball Committee 2014 Wrap-Up, 12/3 12pm at the GCMS offices

Fundraising Committee, 12/11 6pm, at the GCMS offices

C-Section Task Force, TBD 6pm at the GCMS offices

MSF/GCMS Finance Committee
Recessed in December

GCMS Board of Directors
Recessed in December

Community & Environmental
Health Committee
Recessed in December

Practice Managers' Meeting
Recessed in December

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or call (810) 733-9923.



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Application Code:

27

State & County Medical Society Membership Application

☐ I am in my 1st year of practice post-residency.

			in my 2nd year of practice post-residency.	
		☐ I hav	in my 3rd year of practice post-residency. We moved into Michigan, and this is my first or 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.
☐ Male ☐ Female		,	. practicing in the state.	_ · · · · · · · · · · · · · · · · · · ·
First (legal) Name:		Middle Name:	Last Name:	
Nickname or Preferred Form of	Legal Name:		Maiden Name (if appli	cable:)
Job Title:				
W Phone:	W Fax:		H Phone:	H Fax:
Cell:	Email:			
Office Address	ed Mail Preferred B	Il Preferred Mail	and Bill	
City:			State:	Zip:
Home Address	red Mail Preferred B	ill Preferred Mail	and Bill	
City:			State:	Zip:
* Please base my county medica	al society membership on the	county of my (if addresses	s are in different counties): Office Address	Home Address
* Birth Date: / /	Birth Country:		MI Medical License #:	ME #:
Medical School:			Graduation Year: ECFN	NG # (if applicable):
Residency Program:			Program Completion Year:	
Fellowship Program:			Program Completion Year:	
Hospital Affiliation:				
Primary Specialty:			В	oard Certified: 🛘 Yes 🖨 No
Secondary Specialty:			B	oard Certified: 🛘 Yes 🖨 No
Marital Status: 🚨 Single 🚨	Married 🛭 Divorced Sp	oouse's First Name:	Spouse	e's Last Name:
Is your spouse a physician?:	Yes \square No If yes, are the	y a member of MSMS?:	Yes No	
Within the last five years, have y	ou been convicted of a felon	y crime?: 🔲 Yes 🔲 No	If "yes", please provide full information:	
Within the last five years, has yo	ur license to practice medicir	ne in any jurisdiction been	limited, suspended or revoked?: 🛛 Yes 🔲 N	lo If "yes", please provide full information:
Within the last five years, have y	ou been the subject of any d	isciplinary action by any m	edical society or hospital staff?: Yes	No If "yes", please provide full information:
I agree to support the Count the American Medical Assoc			chigan State Medical Society Constitution a	and Bylaws, and the Principles of Ethics of County Medical Society Use Only
Signature:			_ Date:	Reviewed and Approved by
_				
When completed, please	: man to Misivis or Fax	เบ (ว I /) 330-5/9/. l	Hank you:	

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