



THE Bulletin

June 2017 Volume 112, Number 39

MSMS House of Delegates Update

**Updated Legionellosis Guidance
for Clinicians and Laboratories (and survey)**

**Legislative Liaison Committee
Communicates with Delegation**

GCMSA Geranium Luncheon Photos

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injuries in the knee, usually due to athletic activities

Rotator cuff, biceps tendon:
shoulder and arm injuries

Snapping Hip:
inflamed tendon from injury or overuse

Trochanteric bursitis:
hip pain from inflammation of a fluid-filled sac near the joint

Gluteus minimus and medius tendons:
pain in the hip & upper thigh muscles

Foot and ankle tendons and ligaments:
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pain in back of the calf, common with athletes

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THE Bulletin

Read by 96% of GCMS members.

FEATURE ARTICLES

| | |
|--|----|
| May Legislative Liaison Committee Meeting | 7 |
| 2017 MSMS House of Delegates | 8 |
| GCMS Dinner Business Meeting Minutes | 10 |
| HAP Receives Feedback from Practice Managers | 12 |
| Dr. Hebert Letter on Legionella Survey | 14 |
| Legionellosis Guidance for Clinicians and Laboratories | 16 |
| Steps for Flint Residents to Reduce Bacteria in Filtered Water | 20 |
| GCMSA Geranium Luncheon | 22 |
| Stenotrophomonas Maltophilia Infections Media Release | 24 |
| Obituaries | 28 |
| Commit to Fit June 2017 | 30 |

REGULARS

| | |
|---------------------------------|----|
| President's Message | 4 |
| Director's Message | 6 |
| Do You Recognize This Doctor? | 6 |
| GCMS Meetings | 8 |
| GCMS Board of Directors Minutes | 26 |
| Classifieds | 27 |
| Happy Birthday Doctor | 33 |
| Your \$\$\$ at Work | 33 |

Cover Photo: Italy, by Robert Soderstrom, MD

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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RECOGNIZING AND ADDRESSING PHYSICIAN BURNOUT

Physician burnout has been defined as “a syndrome characterized by a loss of enthusiasm for work (emotional exhaustion), a feeling of cynicism (depersonalization) and a low sense of personal accomplishment.” Burnout is dangerous for both patients and physicians. It has been shown to increase medical errors, decrease patient satisfaction and compliance and increase medical malpractice claims. The training environment may contribute to physician burnout. These environments create a culture for perfection with a heavy patient workload including the challenge of working long hours. The environmental factors first encountered in residency sow the seeds for conditions that may well carry over and contribute to burnout in the future when residents become attending physicians.

As a residency program director and undergraduate clerkship director, I have been educating residents and medical students for more than 30 years. Physician burnout is a major area of concern that I have observed and attempted to address firsthand during these years. Unfortunately, over time, it has become more pervasive.

To address physician burnout, satisfaction and wellness have been given high priority as a resident education initiative. The Council for Resident Education in Obstetrics and Gynecology (CREOG) established a task force to look into physician satisfaction and wellness as a CREOG initiative in 2014. The goal of this initiative is to promote the early adoption of behaviors to minimize the development of subsequent burnout. Within the context of the initiative, wellness means caring for the caregiver. A wide range of interventions to encourage professional satisfaction and to enhance wellness during residency



John Hebert, MD

have been proposed and implemented. These interventions include emphasizing healthy lifestyles and habits, such as getting enough sleep, exercising on a regular basis and eating breakfast. Residents are encouraged to take control of their lives and spend time with loved ones. They are encouraged to share experiences with colleagues and to look out for colleagues. They are also encouraged to connect with their patients. Most of these are simple skill sets that residents and medical students are incorporating into their daily routines. The Accreditation Council for Graduate Medical Education (ACGME) has made this a clear imperative for

training programs to focus on in the clinical learning environment with emphasis on wellness training. I hope that addressing this issue and adopting best practices to avoid burnout will be successful at the physician in training level. I also hope to see positive results that may be utilized in addressing burnout in physicians at all stages of their careers.

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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 feel free to contact Peter Levine, Executive Director at 810-733-9925 or plevine@gcms.org.

REFLECTIONS ON LEADERSHIP

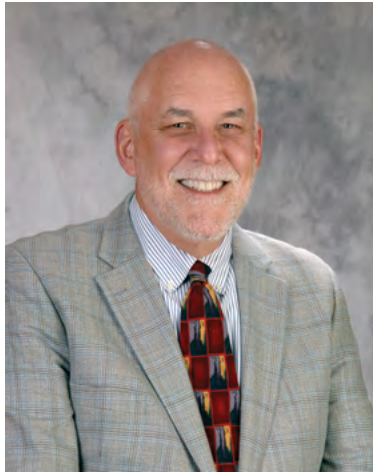
One of the most prominent strengths of the Genesee County Medical Society is working with other organizations. Those organizations are varied and run from the local to the national level.

In the past month, it has been very impressive to see GCMS leadership working as a team as it always does, at the annual Michigan State Medical Society House of Delegates, where issues of critical importance to physicians are discussed and moved forward into policy. Those discussions shape how MSMS deals with regulatory, legislative, and payer organizations. In addition, it has been very impressive to see GCMS members, practice managers, staff, and leadership engage in active discussions to improve relationships between payers and physician practices. This is a constant, ongoing activity to GCMS, and may be invisible to many members. But it is a salient focus of staff and Board activity.

The most recent Town Hall held on the issue of Avoiding Fraud & Abuse, was a prime example of underutilized county medical society services. The session was presented brilliantly by Laura Lovett of The Rybar Group, and it was of great value to those who attended. Perhaps most touching, was the special award presented to Dr. Paul Schroeder. He was designated President for a Day. This award is given rarely, and only to physicians who have shown remarkable leadership and involvement in the Medical Society, without ever having been forced to serve as president. Dr. Schroeder and his wife Phyllis were, as always, gracious and humble. It was such a pleasure to see recognition given to one of the real old-time leaders of this physician community.

The upcoming topics for Practice Managers Meetings are scheduled for the next several months. These topics have been chosen by your practice managers to enhance your practice. These valuable sessions are unique to Genesee County Medical Society and are highly informative. Please contact Sherry Smith if you are interested in having your staff attend, ssmith@gcms.org, or 810-733-9923.

If you know anyone who is not a member, please invite them to join! The following links lead to writable



Peter Levine, MPH

applications.

To join: <https://www.msms.org/Membership/OnlineMembershipApplication4.aspx>

To renew: <https://www.msms.org/Membership/RenewYourMembership.aspx>.

Finally, I would like to comment on something that Cheryl Gibson-Fountain, MD, the newly installed President of MSMS recently brought to everyone's attention. It was not that long ago, the 1960s when African-Americans were not allowed to be members of the AMA and state medical societies. It is unimaginable in the present day, especially in a community like ours, which is so racially, ethnically, nationally, and religiously mixed. It is inconceivable that those thought processes and policies ever existed. But they did.

Do you recognize this
DOCTOR?



Look for the Answer inside!

May Legislative Liaison Committee Meeting

The May 1st meeting of the Legislative Liaison Committee was extremely vibrant. GCMS members met with Representative Joseph Graves, and Tim Sneller as well as the Senator Dave Robertson. Staff was also present from Representative Neeley, Representative Faris, and Congressman Kildee's staff. GCMS representation included Drs. Deborah Duncan, who chaired the session, Jawad Shah, John Waters, and Gary Johnson. Representing Michigan Medical Group Managers Association was Mr. Gary Paavola.

The group discussed several issues very assertively, including opposition to change the auto no-fault system, opposition to cuts to graduate medical education, support for legislation which would ban maintenance of certification as a sole criterion for acceptance on insurance and hospital panels, discussion of legislation related to drug diversion, and opposition to changes to the vaccine waiver laws.

The Legislative Liaison Committee is open to members who are interested in communicating on legislative issues at the state and federal level. Members who are interested in participating in the Legislative Liaison Committee are encouraged to contact Dr. Cathy Blight, Pete Levine at plevine@gcms.org, or Sherry Smith at ssmith@gcms.org.

The next meeting of the Committee is scheduled for 8:00am on June 5, 2017, at the GCMS offices.



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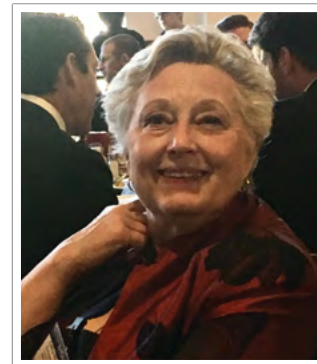


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2017 MSMS HOUSE OF DELEGATES



The GCMS delegation to the MSMS House of Delegates went to Grand Rapids and worked very hard on behalf of this medical community. The delegation included the Drs. Cathy Blight, Laura Carravallah, Pino Colone, Deborah Duncan, Nita Kulkarni, Rama Rao, and Venkat Rao. Also, attending as medical students, were Jeremiah Reenders, Rohit Abraham, and Kevin Lutley.

The Genesee County Medical Society will again be heavily represented on the MSMS Board of Directors. Dr. S. Bobby Mukkamala will continue to serve as Chair. Dr. John Waters will continue to serve as Treasurer. Rohit Abraham will begin his term representing the medical student's section. Dr. Pino Colone has completed his tenure as Speaker of the House.

GCMS members serving on reference committees included Dr. Deborah Duncan on Reference Committee B, Dr. Rama Rao on Reference Committee C. Drs. S. Bobby Mukkamala and Cathy Blight also served as advisors to Reference Committee C. Dr. Laura Carravallah served on Reference Committee D. Dr. Pino Colone served on the Committee on Rules and Order of Business. Dr. Venkat Rao served on the Committee on Ways and Means, with Doctors S. Bobby Mukkamala and John Waters serving as advisors.

GCMS candidates for the delegation to the AMA were all reelected including Drs. Pino Colone and S. Bobby Mukkamala.

The GCMS resolution, entitled "Public Alert System Regarding Water Contamination," was written by medical students and Dr. Carravallah. It was approved.

Perhaps the most fascinating part of the House was the discussion which took place on Saturday afternoon on the issue of MSMS' organizational remodeling. During that process, delegations split up and held focused discussions framed around models for the future of MSMS. The result of the discussions will be synthesized into a report which will come back to the House of Delegates.

The Sunday discussions of reference committee reports revolved around medical economics, the future of medicine, third-party relations, public health, maintenance of certification, and many other issues.

GCMS MEETINGS — June 2017 —

Legislative Liaison Committee, 6/5

8:00am, GCMS Office

2017 Ball Committee, 6/6

12:00pm, GCMS Office

Community & Environmental Health Committee, 6/7

12:30pm, GCMS Office

MSF Fundraising Committee, 6/12 (tentative)

6:00pm, GCMS Office

Practice Managers, 6/22

8:00am, GCMS Office

Finance Committee, 6/27

5:15pm, GCMS Office

Board of Directors, 6/27

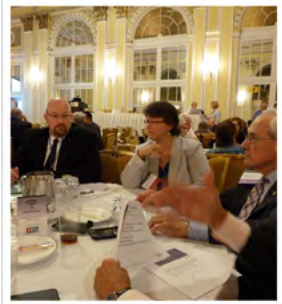
6:00pm, GCMS Office

Save the Date!

2017 GCMS/GCMSA President's Ball, 11/18

6:00pm, Genesys Conference & Banquet Center





Genesee County Medical Society Dinner Business Meeting Minutes May 4, 2017

I. Call to Order:

The meeting was called to order at 6:30pm by Gerald Natzke, DO, President Elect, in the dining room of the Flint Golf Club.

II. Introduction of Guests:

Dr. Natzke introduced guests for the evening including Laura Lovett, speaker from The Rybar Group, and Barbara Hunyady, from Cline, Cline, and Griffin.

III. Review of Minutes from February 2, 2017, Dinner Business Meeting:

Motion: **That the minutes of February 2, 2017, Dinner Business Meeting is approved as published in the March 2017 issue of The Bulletin. The Motion Carried.**

IV. Announcements:

1) Dr. Natzke announced at the MSMS House of Delegates will be held on May 6-7th. He noted that there are two slots open in the delegation, and encouraged attendees to consider coming to the House of Delegates in Grand Rapids.

2) GCMS Practice Managers Meetings

Dr. Natzke reviewed the topics for the upcoming practice manager's meetings, and encouraged attendance. He noted that the sessions are extremely productive and encouraged members to send their staff. The next meeting will be on May 23rd and will focus on McLaren Health Plan as well as PCMH & PGIP.

V. President for a Day Award Presentation:

Dr. Natzke introduced Dr. Paul Schroeder. Dr. Schroeder has been nominated for the Medical Society's highest expression of respect, the President for a Day Award. Dr. Natzke reviewed the plaque which read this follows:

Whereas, Paul Schroeder, MD, has rendered meritorious services and contributions to the Genesee County Medical Society, and

Whereas, it is certain that members of this Society did profit significantly through his wise and perceptive leadership and counsel, and

Whereas, his loyal dedication to responsibility contributed to the course and progress of this Society, and

Whereas, he has been and continues to be a source of inspiration to his many friends and colleagues, now

Whereas, the Genesee County Medical Society does extend to him its most profound expression of esteem and appreciation and hereby confers upon him the office of President for a Day, May 4, 2017.

Dr. Schroeder said a few words. He noted that he had been in practice for 57 years. The changes in medicine, in the hospitals, and imaging, and insurances, were amazing. He said it helps to have a Medical Society which has your back, and noted that he knows better than most of its importance. He thanked his wife Phyllis for being a doctor's wife for a lifetime.

VI. Introduction of Speakers, Town Hall Meeting

Laura Lovett, professional services consultant from The Rybar Group provided a riveting presentation on the new responsibilities of physicians as a relates to compliance and other issues of fraud and abuse.

Barbara Hunyady, attorney with Cline, Cline, and Griffin served as a reactor to the presentation.

VII. Next Meeting:

The next General Membership Meeting will take place on September 7, 2017.

VIII. Adjournment:

No further business appearing. The meeting was adjourned at 8:30pm.

Submitted by,
Peter Levine, MPH





HAP Receives Feedback from Practice Managers

On April 27, a room full of GCMS practice managers met with key representatives of the Health Alliance Plan and their associated Medicare and Medicaid plans. The featured presenters were Deborah Spencer, Associate Vice President of Provider Services, and Shannon Wejrandt, Director of Provider Network Management.

The purpose of the meeting was to respond to issues raised at a special February session of the practice managers group. At that meeting, a list of concerns was expressed and documented. The reaction to the HAP presentation was very strong and commitments were made by the Health Alliance Plan staff to respond quickly.





Also presented, was an update on Advanced Care Planning by Jennifer Sesti of the Greater Flint Health Coalition. She asked for practice managers to consider attending training sessions for Advanced Care Planning health care providers and to ask their physicians to also attend. In addition, a survey was distributed regarding Advanced Care Planning practices.



Future sessions of the practice managers group are as follows:

June 22nd,
“Leaving Money on the Table”

July 27th,
no meeting - enjoy your summer!

August 24th,
“Molina Healthcare”

September 28th,
“Meridian: Updates & Feedback”

Please ask your practice managers to attend.

These sessions are invaluable. Please contact Sherry Smith at ssmith@gcms.org, or call 810-733-9923, to ensure that your practice manager is on our notification list.



Dear members of the Genesee County Medical Society,

I would like to invite you to participate in a research study conducted as part of our partnership with Wayne State University. This partnership aims to reduce the incidence of Legionnaires' disease as well as related hospitalizations and deaths. An element of this research study is to administer a Legionnaires' disease focused survey to the physician community. It is important for us to better understand current practices related to the clinical diagnosis and treatment of Legionnaires' disease. As such, this survey will identify the knowledge, attitudes and clinical practices regarding this illness from physicians across all specialties. The results of this study will be used to develop educational and prevention strategies that help reduce mortality due to Legionella pneumophila infection.


The survey contains 13 questions and will take no longer than five minutes to complete. Survey participants are eligible to receive one of ten \$25 gift certificates at the point of study completion. You can access the survey by clicking the link below. We also invite you to review the attached information sheet regarding the project before taking the survey.

Recently, you were sent a copy of the Legionella Guidelines for Clinicians updated this year. Please review these guidelines and keep for your future reference. A copy of those guidelines may also be found in this issue of The Bulletin.

Thank you for your commitment to the health of this community.

Survey link: https://waynestate.az1.qualtrics.com/jfe/form/SV_4G8tNvJT3VeGfvn

Sincerely yours,



John Hebert, MD
President

Organized Medicine's Leading Edge

Mission - Leadership, advocacy, and service on behalf of its members and their patients.
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.

Issues of Serious Concern for Medical Practices!

Don't let your practice manager miss these important meetings!



Held 4th Thursday of each month from 8am to 10am.

The following topics are tentatively scheduled and subject to change

June 22nd

Presenter(s):

“Leaving Money on the Table”

Laura Lovett, Consultant, Data Integrity and Compliance, The Rybar Group

July 27th

No meeting, enjoy your summer!

August 24th

Presenter(s):

"Molina Healthcare"

Molina Faculty - TBD

September 28th

Presenter(s):

“Meridian: Updates & Feedback”

Jacqueline Kirejczyk, Director of Network Development
Erica D’Ambrosio, Provider Network Development Representative

**Genesee County Medical Society | Rapport Conference Room
4438 Oak Bridge Drive, Suite B | Flint, MI 48532**

Legionellosis Guidance for Clinicians and Laboratories

In the past three years, over 100 cases of Legionellosis have been reported from health-care providers in Genesee County, Michigan. Public health investigations are ongoing to determine possible common sources of exposure. The Michigan Department of Health and Human Services (MDHHS) and Genesee County Health Department (GCHD) are asking that the clinical community assist in case findings through accurate identification, testing and reporting of all suspected cases of Legionellosis.

Epidemiologic Risk Factors for Legionellosis

- Recent inpatient or outpatient healthcare exposure (up to 10 days prior to symptom onset)
- Chronic lung disease
- Current or former smoker
- Congestive Heart Failure
- Immune system suppression (e.g., organ transplant recipients, immunosuppressive medication usage)
- Chronic renal or liver disease including end-stage organ disease
- Solid organ or hematologic malignancy
- Diabetes
- Recent travel with an overnight stay away from home (up to 10 days prior to symptom onset)
- Exposure to hot tubs (e.g., whirlpool spas) including either direct use, walking or sitting near a spa
- Recent repairs or maintenance work on domestic (i.e., household) plumbing
- Age \geq 50 years

Diagnosing Legionellosis

| CHARACTERISTIC | LEGIONNAIRES' DISEASE | PONTIAC FEVER |
|-----------------------|--|---|
| Clinical features | Pneumonia (fever, cough, chills, dyspnea), neurologic abnormalities, myalgia or arthralgia, diarrhea, chest pain, headache (e.g., obtundation, seizures and focal neurological findings) and nausea/vomiting may also be present | Flu-like illness (fever, chills, malaise) without pneumonia |
| Radiographic | Yes | No |
| Pneumonia | | |
| Incubation period | 2 to 10 days after exposure | 24 to 72 hours after exposure |
| Etiologic agent | Legionella species | Legionella species |
| Attack rate | < 5% | > 90% |
| Isolation of organism | Possible | Never |
| Outcome | Hospitalization common Case-fatality rate: 5- 30% | Hospitalization uncommon Case-fatality rate: 0% |

Source: <http://www.cdc.gov/legionella/clinicians.html>

Who to Test for Legionnaires' Disease

Clinicians should use the following guidance to determine which patients to test for Legionnaires' disease. Additionally, infection control practitioners can use these guidelines to determine which respiratory specimens may be eligible for further testing.

- Any patients with suspected healthcare-associated pneumonia (including patients who are diagnosed with pneumonia during their hospital stay)
- Patients with severe pneumonia, in particular those requiring intensive care
- Patients with immune suppressing/compromising conditions
- Patients who have failed outpatient antibiotic therapy for pneumonia
- Patients with a history of travel within two weeks of the onset of illness

NOTE: Review of clinical presentations of Genesee County residents diagnosed with Legionnaires' disease during 2014-2016 demonstrates that respiratory symptoms (e.g., shortness of breath, cough) may be subtle or even absent initially and that a subset of patients may present with mental status changes and gastrointestinal symptoms (e.g., diarrhea, vomiting) in addition to or prior to the onset of pneumonia. While diagnosis of suspected pneumonia is still a necessary threshold for Legionnaires' disease testing, it is also important for healthcare providers to maintain a high index of suspicion for Legionnaires' disease, particularly in patients with multiple risk factors.

The majority of patients diagnosed during the 2014-2016 period experienced chronic lung disease, congestive heart failure and/or were current or former smokers.

Patients have resided across Genesee County.

Testing for Legionnaires' Disease

Isolation of *Legionella* from respiratory secretions, lung tissue, or pleural fluid is still an important method for diagnosis, despite the convenience and specificity of urinary antigen testing. Investigations of outbreaks of Legionnaires' disease rely on detection of *Legionella* bacteria in both clinical and environmental samples. Clinical and environmental isolates can be compared using monoclonal antibody and nucleic acid-based typing tests. Because *Legionella* species are commonly found in the environment (including residential water systems), bacterial isolates from case-patients are necessary to trace back to possible sources of exposure and to interpret the findings of an environmental investigation in order to prevent disease from that source. Further, because Legionnaires' disease may require targeted antimicrobial therapy beyond the usual community-acquired or hospital-acquired pneumonias, swift diagnosis is important.

- The *Legionella* urinary antigen test AND culture of lower respiratory tract secretions on selective media are the recommended diagnostic tests for Legionnaires' disease (Please note that the *Legionella* urinary antigen test detects serotype 1 of *Legionella pneumophila*; other *L. pneumophila* serotypes and other *Legionella* species may not be detected by the urinary antigen test).
- If a provider obtains a *Legionella* urinary antigen test on a patient with suspected Legionellosis, a lower respiratory tract specimen should be collected for *Legionella* culture at the same time, preferably before the administration of antibiotics.
 - A tracheal aspirate or bronchoalveolar lavage may be collected in patients who are intubated or undergoing bronchoscopy.
 - Sputum sample collection should be attempted in patients who are not intubated or not undergoing bronchoscopy.
 - Oropharyngeal or nasopharyngeal swabs are not acceptable clinical specimens for *Legionella* culturing.
 - Culture for *Legionella* should specifically be requested so that specimens are plated on the correct growth media. Any clinical specimen remaining from the respiratory culture should be immediately frozen and stored by the hospital laboratory. If hospital laboratory capacity is limited, then sputum samples can be transported and stored at the MDHHS Bureau of Laboratories (BOL) free-of-charge.

Legionellosis Guidance for Clinicians and Laboratories (CONT.)

Note: For new onset community-acquired pneumonia or health-care associated pneumonia, testing by a Legionella urinary antigen test and respiratory secretion culture is recommended within 24 hours of patient presentation to a healthcare provider. This diagnostic approach is recommended to facilitate early identification of patients with Legionellosis and help guide early appropriate treatment which can reduce mortality. This activity will also help identify increases of illness in Flint and Genesee County as well as institute targeted Legionellosis prevention measures.

Respiratory samples from patients whose urinary antigen test is positive should be sent with specific request to have the specimen cultured for Legionella at the MDHHS Bureau of Laboratories (BOL). Any hospital laboratory experiencing concerns can communicate those concerns to GCHD or MDHHS and we will provide assistance. Any positive Legionella culture isolate identified in hospital laboratories should be preserved and shipped to the BOL for confirmatory testing.

Clinical Isolates or Specimen Shipping

The MDHHS Bureau of Laboratories will test clinical specimens or respiratory specimens submitted to the BOL for Legionella bacteria. Please note: There is no fee for specimen shipping or testing. Please avoid repeated freezing and thawing of isolates/specimens. Contact the MDHHS BOL with any questions about isolate/specimen submission or shipment at: (517) 335-8067.

Treatment

Adults

Recommended treatment for Legionellosis in most patients includes either a fluoroquinolone (e.g., levofloxacin, 750 mg once daily or moxifloxacin, 400 mg once daily) or a macrolide (e.g., azithromycin, one gram on day one, followed by 500 mg once daily) for a total treatment duration of 10 to 14 days. Because macrolides may interfere with drugs metabolized by cytochrome P450 (CYP) 3A4 isoenzyme (e.g., cyclosporine), the quinolones mentioned above are suitable alternatives to treat Legionnaires' disease in patients taking cyclosporine or other CYP3A4 substrates.

Children

Azithromycin is the drug of choice for children with suspected or confirmed Legionellosis. The initial course should be intravenously administered. After a good clinical response is observed, azithromycin can be switched to the oral route. The recommended duration of therapy is 5 to 10 days for azithromycin and 14 to 21 days for other drugs. Longer courses of therapy are recommended for patients who are immunocompromised or who have severe disease (American Academy of Pediatrics Red Book 2015, 30th Edition).

Reporting

By law, Legionellosis is a reportable disease in Michigan. Health care professionals should report both Legionnaires' disease and Pontiac Fever cases via the Michigan Disease Surveillance System (MDSS) or directly to the Genesee County Health Department. Physicians are requested to collect and record illness onset dates as part of the patient record. An accurate illness onset date is extremely important to determine the patient's potential environmental exposures and is vital to the investigation of an outbreak. In patients with chronic respiratory conditions, the first appearance of fever may be a useful indicator of Legionellosis onset date.

Legionellosis Prevention Measures

- Smoking increases the risk of Legionnaires' disease. This is an opportunity to promote smoking cessation.
- The mode of transmission includes inhalation of vapor or aspiration.
- Be sure to ask about travel history including cruise ship related travel.
- This is also an opportunity to promote use of pneumococcal and flu vaccines.
- Recommend use of bottled water for drinking/cooking/brushing teeth for vulnerable populations:
- immunocompromised/suppressed, diabetics, cancer, leukemia, lymphoma, COPD, CHF and the frail/elderly/infants and those with long-term corticosteroid use, and including those with swallowing difficulties.
- Also, recommend tub baths for these vulnerable populations unless there is a risk for falls.
- While public health experts believe the risk of getting Legionnaires' disease from a home water system is much smaller than the risk from large water systems, home owners may be able to reduce the risk further by maintaining their water systems.
- Showers: Because they remain damp, shower heads could hold Legionella bacteria. Removing the shower head, manually cleaning it to remove scale and sediment, and soaking it in a mixture of 1 tablespoon of household bleach to 1 gallon of water for about 2 hours will disinfect the shower head.
- Humidifiers: Some homes have whole house humidifiers. You should clean and disinfect humidifiers regularly according to manufacturer's directions. Always unplug the humidifier first. Clean the inside
- of the humidifier per the manufacturer's instructions, using a mixture such as 1 tablespoon of household bleach to 1 gallon of water, and dry. Thoroughly clean the outside of the humidifier before and after storage.
- CPAP machines and nebulizers should also be cleaned per manufacturer's recommendations. Sterile or distilled water should be used. If the manufacturer's instructions cannot be located, the healthcare equipment supplier can provide them.
- Water Heaters: In some cases, Legionella bacteria have been found inside residential water heaters.
- Legionella bacteria have more often been found in electric water heaters than in gas water heaters. Performing regular maintenance of home water heaters per manufacturer's instructions is recommended to help reduce the risk of Legionella bacteria growing. Most manufacturers recommend that water heaters be flushed on an annual basis. If you cannot locate the manufacturer's instructions, seek the advice of a licensed plumber.
- Water scientists, public health officials, and healthcare experts are currently discussing the risks and benefits of increasing the recommended water heater temperature from 120°F to 130°F which may reduce the risk of Legionella bacteria growing. However, because of the risk of scalding, increasing the water heater temperature from 120°F to 130°F is not currently being recommended. Updated guidelines regarding water heater management for risk prevention will be provided should recommendations change.

For additional information, please contact:

Genesee County Health Department: (810) 257-1017 or (810) 257-3815 or
MDHHS Communicable Disease Division: (517) 335-8165.

STEPS FOR FLINT RESIDENTS TO REDUCE BACTERIA IN FILTERED WATER

ANN ARBOR—A team of researchers from Michigan universities and hospitals has recommendations for Flint water customers to most effectively use the point-of-use water filters on their taps.

The recommendations go beyond the filter manufacturers' instructions. They advise users to flush the pipes and filters for longer periods of time each morning or after long periods of not using their water.

The research team is co-led by the University of Michigan and Wayne State University, and includes faculty members from Michigan State University, Kettering University and the Henry Ford Health System.

More than 100,000 faucet-mounted, point-of-use water filters and several hundred thousand cartridges have been distributed in Flint since October 2015. These activated carbon block, or ACB, filters are designed to remove metals, such as lead, chlorine, which is added to kill bacteria, and chemicals produced during chlorination. But several previous studies have shown that they can support the growth of bacteria in water.

All drinking water contains some bacteria, the researchers say. The researchers are still investigating whether any harmful bacteria are present in Flint-area filters. They have not, at this time, linked the bacteria to any illnesses.

In the meantime, Flint residents who wish to reduce the bacteria in the water they use can follow these steps each morning or after long periods of not using their water:

- Turn the switch on the filter to the position that directs water away from the filter through the bypass and run the faucet until the water temperature cools. This bypass step avoids the use of water that has been sitting in the home's plumbing and typically contains very little chlorine. It sends the water with the highest bacterial counts down the drain rather than through the filter, where it could lead to more bacteria growth. This process could take several minutes.

- Run filtered water for 15 seconds before collecting any to use. This is longer than the five seconds that most filter manufacturers recommend.
- “Flushing as we recommend can reduce the bacteria levels in water by 10 or 100 times,” said Nancy Love, U-M professor of civil and environmental engineering who led the filter research. “That said, we know that Flint residents' water bills are among the highest in the country, and this approach could create additional financial hardship.”

If users follow this regimen, the researchers say it's fine to follow manufacturers recommendations for replacing filters after processing about 100 gallons of water, or when the filter's red light goes on.

Although the research team has not studied shower filters or whole-house filters, they do not recommend that residents use them at this time.

“Some whole house filters can remove disinfectant residual in water that flows through household pipes, which can allow higher levels of bacteria to grow. Some shower filters can behave like kitchen faucet filters and support the growth of bacteria,” said Shawn McElmurry, a professor of civil and environmental engineering at Wayne State.

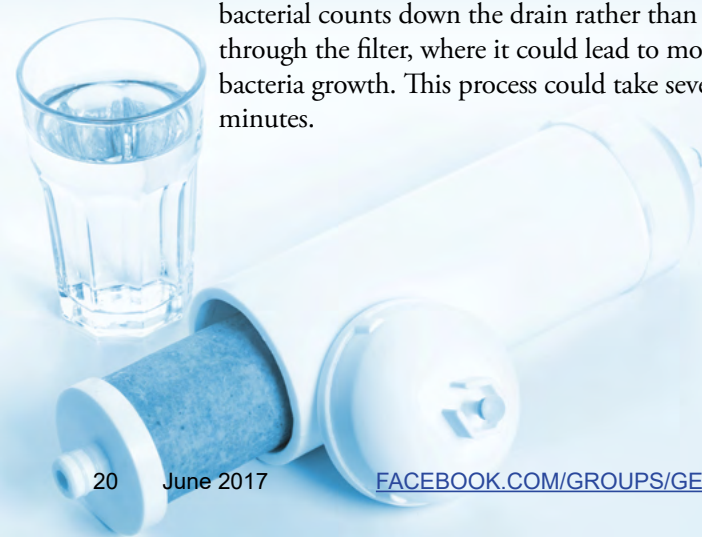
The research team is coordinating closely with the Genesee County Medical Society and the Flint Mayor's Office.

“It's important that consumers of Flint municipal water understand that the filters for lead do not filter out microorganisms,” said Peter Levine, executive director of the Genesee County Medical Society. “These new guidelines are beneficial for those who wish to reduce the level of bacteria in their water as a general precaution. However, for those at high risk of infection due to a weakened or immature immune system, we recommend that they use only bottled water that is purified by reverse osmosis for drinking, cooking and tooth-brushing.”

The study was supported by grants to U-M and WSU from the National Science Foundation.

Team members say they appreciate the cooperation of Flint residents, which makes the study possible. Residents have been providing access into their homes and supplying the filters used in the study.

U-M, MSU and WSU make up the state's University Research Corridor, one of the nation's top academic research clusters.



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GENESEE COUNTY MEDICAL SOCIETY ALLIANCE

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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 – really means to you.

The Medical Society Foundation funds have been used to support the charitable activities of the Genesee County Medical Society.

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

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.

Mail your donations to:

**Medical Society Foundation
4438 Oak Bridge Drive, Suite B
Flint, MI 48532-5467**

MEDIA RELEASE

DATE: April 19, 2017 **END DATE:** May 19, 2017

CONTACT: Danielle Steplowski, MS
Epidemiologist

PHONE: (810) 257-3815

RE: Stenotrophomonas Maltophilia

Due to the rising interest in *Stenotrophomonas maltophilia* infections, the Genesee County Health Department (GCHD) wants to keep everyone informed about this bacterium. *Stenotrophomonas maltophilia* is a multidrug-resistant organism that is most commonly associated with respiratory tract infections. Transmission of *Stenotrophomonas maltophilia* to susceptible individuals may occur through direct contact from several sources. While *Stenotrophomonas maltophilia* is a rare cause of infection, it is becoming more common among hospitalized individuals with weakened immune systems.

Stenotrophomonas maltophilia is generally not considered dangerous for healthy individuals and usually infects those who are critically ill or immunocompromised. Individuals who are at increased risk of infection include those with cancer, cystic fibrosis, HIV, neutropenia, recent surgery or trauma, mechanical ventilation, previous therapy with broad-spectrum antibiotics, and prolonged hospitalization (especially in intensive care units).

Infections from this bacterium can occur in a variety of tissues and organs and symptoms vary depending on the affected location. As most *Stenotrophomonas maltophilia* infections involve the respiratory tract, symptoms often include a cough, shortness of breath, and chest pain when breathing or coughing. Individuals with any symptoms of infection similar to those mentioned above should contact their healthcare provider. A *Stenotrophomonas* fact sheet is posted on the GCHD website at www.gchd.us.

Genesee County Health Department. Your Health. Our Work.
##

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Burton Branch ♦ G-3373 S. Saginaw Street ♦ Burton, Michigan 48529
Main Phone 810-257-3612 ♦ Visit us at: www.gchd.us



What is *Stenotrophomonas Maltophilia* Infection?

- An infection caused by multidrug-resistant bacteria called *Stenotrophomonas maltophilia* (*S. maltophilia*). These bacteria have been found in clinical and medical settings (i.e. hospitals and clinics), water-based environments, soil, and on contaminated medical devices and solutions. Infection can occur in a variety of organs and tissues, but most commonly involves the respiratory tract. Infections associated with *S. maltophilia* include:
 - Pneumonia
 - Bacteremia
 - COPD
 - Urinary tract infection
 - Endocarditis
 - Meningitis
 - Eye infection
 - Soft tissue infection

Who is at risk?

- Individuals with weakened immune systems from diseases like HIV, cancer, COPD, and cystic fibrosis
- Individuals taking medications that weaken the immune system
- Individuals that have had an organ transplant or have an open wound
- Individuals with an indwelling catheter or using respiratory therapy equipment
- Individuals having prolonged hospitalization or an intensive care unit stay

What are symptoms that could occur?

- High fever
- Shortness of breath
- Headache
- Cough
- Rapid heart rate
- Pneumonia

As infection can occur in a variety of organs or body parts, symptoms relate to the body part affected.

How is it diagnosed and treated?

- Physician evaluation and laboratory testing
- Treatment often includes antibiotics (drugs that kill bacteria in the body)

How is it spread?

- Direct contact with a contaminated source or a source not properly cleaned
- Rarely spread from person-to-person

Are there complications?

- Delay in appropriate treatment can increase risk of complications
- Like many other illnesses, individuals with other health issues are at greater risk of complications

If I have any other questions, whom can I contact?

- Call the Genesee County Health Department at 257-1017

Genesee County Medical Society
Board of Directors
March 28, 2017 - Minutes

I. Call to Order

Dr. John Hebert, President, introduced Dr. Betty Chu, Candidate for Michigan State Medical Society President Elect, present via FaceTime. Dr. Hebert then introduce Dr. Phil Wiese, Candidate for Vice Speaker of the Michigan State Medical Society, who also joined the meeting via FaceTime.

II. Review of Minutes

Motion: **that the minutes of February 28, 2017, Board of Directors meeting be approved as presented. The motion carried.**

III. Reports

A) Community & Environmental Health

Motion: **that that the updated GCMS position on Flint Municipal Water press release be approved for distribution as edited. The motion carried.**

B) Finance

1. Budget-to-Actual Report, Period ending February 28, 2017

Levine reviewed the budget to actual report for the period ending 2/28/17.

Motion: **that the budget to actual report for the period ending February 28, 2017, be approved as presented. The motion carried.**
The Medical Society has signed the contract with Wayne State University.

C) Membership

The Board reviewed the nonpayment report (NPD) from the Michigan State Medical Society. It was noted that there are several physicians who have indicated to Board members that they had paid their dues. It is apparent that they have not yet paid.

D) Legislative Liaison

Dr. Cathy Blight reported on the March meeting of the Legislative Liaison Committee. She noted that it was well attended by legislators. We need more physicians to attend. The scope of issues covered at these meetings is remarkable, and the legislators genuinely appreciate physician input.

E) Greater Flint Health Coalition

Drs. Waters and Reynolds reviewed the current state of the State Innovation Model.

F) District Directors

Dr. S. Bobby Mukkamala reported that the MSMS Board met the previous week. Its primary focus was the upcoming House of Delegates as well as the MSMS Task Force for Organizational Remodeling. The Task Force will present its findings to the House of Delegates on Saturday afternoon. All delegates are requested to attend. Dr. Mukkamala reported that the Genesee County Medical Society is represented in virtually all reference committees at the 2017 MSMS House of Delegates.

Genesee County Medical Society
Board of Directors
March 28, 2017 - Minutes

G) Presidents' Report

Dr. Hebert reported that the May 4, 2017, GCMS Town Hall meeting will be held on the topic of "Avoiding Fraud & Abuse". He encouraged everyone to attend and bring practice managers.

Dr. Hebert also reported to the Board that the press release directed by the Board to be sent out expressing gratitude and recognition of foreign born physicians was sent to all media outlets, as well as to GCMS members.

Dr. Hebert reviewed the list of meeting topics scheduled for several upcoming practice managers meetings. He noted that these are invaluable presentations. No other Medical Society is hosting meetings of this type with such influential payers and policymakers.

Dr. Hebert reported that the Medical Society will be honored by the Genesee Health Plan for its work on the Flint Water Crisis. In addition, ten physicians and staff will receive honor for their work on the Flint Water Crisis. The individual members to be honored will include: Drs. Bishr Al-Dabagh, Walter Barkey, Laura Carravallah, Kevin Gaffney, Eyassu Habte-Gabr, Mona Hanna-Attisha, Gerald Natzke, Lawrence Reynolds, Robert Soderstrom, John Waters, and Peter Levine.

Motion: that the August Board meeting be recessed. The motion carried.

Dr. Hebert reported that Hurley Medical Center will pay membership dues for all McLaren residents if each individual resident indicates that they wish to join. Dr. Hebert asked for a flyer to be distributed to each resident.

IV. Adjournment

No further business appearing, the meeting was adjourned at 7:13pm.

Respectfully submitted,

Peter Levine, MPH
Executive Director

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by not-for-profit urgent care center. Please contact Brenda at bcraft@gcms.org or call (810) 232-2710.

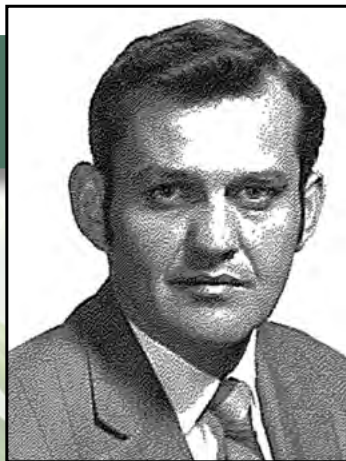
PHYSICIANS NEEDED

at the Emergency Medical Center of Flint Various shifts available for part-time, as well. Must be willing to do minor stitches, infants & children, splinting, and minor eye & ear procedures. This is a classic urgent care much like family practice. Hours of operation Mon, Wed: 10am-9pm, Tue, Thur, Fri, Sat: 12pm-9pm, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503. **Contact Pete Levine at 810-733-9925.**

CHECK OUT OUR WEBSITE WWW.GCMS.ORG

OBITUARIES

Paying Tribute to doctors who have touched so many Lives.

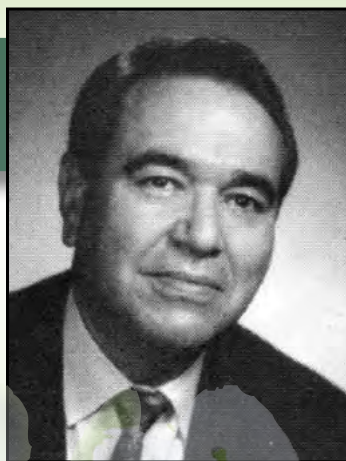


Frank T. White, MD

Dr. Frank T White, a 50-year award member of GCMS passed away at his residence on May 13, 2017, at the age of 85.

Dr. White was born in Middleport Ohio. He graduated from Ohio State University College of medicine in 1955. He served as a captain in the United States Air Force, and subsequently opened a practice in Genesee County. He was board certified in family practice, and served as the physician for the Davison High School football team for 20 years.

He is survived by his wife Diane.



Virgilio Villarreal II, MD

Dr. Virgilio Villarreal, II, passed away on May 19, 2017, at the age of 83.

His wife, Ana Maria, and 4 children survive him. Dr. Villarreal was born and raised in Mexico. He received his medical degree from Autonoma University of Mexico City, Mexico. He completed residencies in Colorado and Flint, Michigan, which is where he ultimately made his home for over 40 years.

Dr. Villarreal was a board-certified surgeon specializing in general surgery, trauma and surgery of the hand. He was a member of the American Medical Association, American College of Surgeons, Michigan State Medical Society, Past President of the Genesee County Medical Society, and Flint Rotary Club. Dr. Villarreal also served as Medical Director for the Chevrolet Truck Assembly Plant in Flint, MI.

Dr. Villarreal was a volunteer surgeon for the Army Reserve Medical Corps during the Vietnam War



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HEALTHCARE FINANCIAL CONSULTANTS



June 2017 Fitness Calendar

FREE! Commit to Fit! Class Schedule

Commit to Fit offers fitness classes at **no cost** to all individuals who live or work in Flint and Genesee County. Fitness Centers require participants to be age 18 and older, other locations are open to all ages. See back side for details. [Click HERE to Access the](#)

Nutrition Education & Resources Calendar

| | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
|-----------|---|--|--|---|--|---|
| | | | | <p>Enhance Fitness 1 Flint Farmers' Market 10:00 a.m.</p> <p>Basic Yoga IHFC 6:45 p.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Enhance Fitness Hamilton Health Network 2:30-3:30pm</p> <p>iBikeParks! Bluebell Beach, Pavilion 1 6:00-8:00pm</p> | <p>Enhance Fitness 2 Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm</p> <p>Zumba® U of M-Flint 5:30-6:30pm</p> | <p>3</p> |
| JUNE 2017 | <p>5</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Senior Stretch YMCA Downtown 10:00</p> <p>Aqua Fitness U of M-Flint Rec Center 5:30-6:30 pm</p> | <p>6</p> <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>WERQ Linden County Park, Pavilion 4 7:00-8:00 pm</p> <p>iBikeParks! Max Brandon Park 2, near MLK & Stewart Ave</p> | <p>7</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm</p> <p>Zumba Gold (Beginner) GAC 5:30 p.m.</p> <p>Enhance Fitness Hamilton Health Network 5:30-6:30pm</p> <p>Belly Dance Flushing County Park, Pavilion 5 7:00-8:00pm</p> | <p>8</p> <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Basic Yoga IHFC 6:45 p.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Dancing through the Decades Davison Roadside Park 7:00-8:00pm</p> <p>iBikeParks! Bluebell Beach, Pavilion 1 6:00-8:00pm</p> | <p>9</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm</p> <p>Zumba® U of M-Flint 5:30-6:30pm</p> | <p>10</p> <p>Full Moon Hike For-Mar Nature Preserve & Arboretum 9-10:00pm</p> |
| | <p>12</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Senior Stretch YMCA Downtown 10:00 a.m.</p> <p>Aqua Fitness U of M-Flint 5:30pm</p> | <p>13</p> <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Let's Hike It Baby** For-Mar Nature Preserve & Arboretum 10-11am</p> <p>iBikeParks! Max Brandon Park 2, near MLK & Stewart Ave 6-8:00pm</p> <p>WERQ Linden County Park, Pavilion 4 7-8:00pm</p> | <p>14</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm</p> <p>Zumba Gold (Beginner) GAC 5:30 p.m.</p> <p>Belly Dance Flushing County Park, Pavilion 5 7-8:00pm</p> | <p>15</p> <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Basic Yoga IHFC 6:45 p.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Yoga In Nature** For-Mar Nature Preserve 6-7:00pm</p> <p>iBikeParks! Bluebell Beach, Pavilion 1 6:00-8:00pm</p> <p>Dancing through the Decades Davison Roadside Park 7:00-8:00pm</p> | <p>16</p> <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm</p> <p>Zumba® U of M-Flint 5:30-6:30pm</p> <p>Bat Walk Linden County Park, Pavilion 2 9-10:00pm</p> | <p>17</p> <p>Enchanted Forest: Treasure Island** For-Mar Nature Preserve & Arboretum 11-2:00pm</p> |

June 2017 Fitness Calendar

FREE! Commit to Fit! Class Schedule

| 19 | 20 | 21 | 22 | 23 | 24 |
|--|--|---|---|--|----|
| <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Senior Stretch YMCA Downtown- 10:00</p> <p>Aqua Fitness U of M-Flint Rec Center 5:30-6:30 pm</p> <p>Enhance Fitness Bluebell Beach, Plaza in front of the Bath House 6:30-7:30pm</p> | <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Let's Hike It Baby** For-Mar Nature Preserve 10-11:00am</p> <p>WERQ Linden County Park, Pavilion 4 7-8:00pm</p> <p>Yoga for Kids Linden County Park, Pavilion 3 7-8:00 pm</p> <p>Be Moved Flushing County Park, Pavilion 5 7-8:00pm</p> | <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm</p> <p>Zumba Gold (Beginner) GAC 5:30 p.m.</p> <p>Belly Dance Flushing County Park, Pavilion 5 7:00-8:00pm</p> <p>Yoga For Families Flushing County park Field in front of Pavilion 1 7:15-8:15pm</p> | <p>Enhance Fitness Flint Farmers' Market 10:00 a.m.</p> <p>Basic Yoga IHFC 6:45 p.m.</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Yoga In Nature** For-Mar Nature Preserve 6-7:00pm</p> <p>iBikeParks! Bluebell Beach, Pavilion 1 6:00-8:00pm</p> <p>Dancing Through the Decades Davison Roadside Park 7:00-8:00pm</p> | <p>Enhance Fitness Hasselbring Senior Center 9:00 a.m.</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm</p> <p>Zumba® U of M-Flint 5:30-6:30pm</p> | |
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June 2017 Fitness Calendar

FREE! Commit to Fit! Class Schedule

Class Descriptions & Locations

Basic Yoga (1 hour)

This class is a balanced flow of postures designed to build stamina, strength, and flexibility while promoting weight loss and general stress relief.

Insight Health & Fitness Center (IHFC)

Formerly Hurley Health & Fitness Center
4500 S. Saginaw St
Flint, MI 48507
(810) 893-6489



Zumba Gold (1 hour) - A less intense version of the classic Zumba. This class offers fun music to keep the excitement high while keeping the impact low.

Genesys Athletic Club (GAC)

801 Health Park Blvd
Grand Blanc, MI 48439



Enhance Fitness (1 hour) – A fun, energizing class geared toward improving overall functioning and well-being. Improve your cardiovascular fitness, strength, flexibility and balance!

Hamilton Health Network

2900 N Saginaw St., Flint, MI 48505
Thursday May 4th 2:30-3:30 pm &
Wednesday May 10th 5:30-6:30pm

Senior Stretch (1 hour) - This class will help improve overall strength and flexibility. The class is led by a certified senior fitness instructor who will guide you through the exercises at your own pace. This class is perfect for all ability levels.

YMCA Downtown Flint

411 E. 3rd Street
Flint, MI 48503
(810) 232-9622



Genesee County Parks & Rec Programming

For more information please go to:

- Geneseecountyparks.org or call 800-648-PARK
- Descriptions for classes such as Be Moved, WERQ, Dancing Through the Decades, iBikeParks!, Yoga in Nature, Belly Dance, Let's Hike It Baby, Yoga for Kids, Yoga for Families, and more can all be found at the online calendar on Commit2fit.com or geneseecountyparks.org

All programs are free unless noted with an asterisk (**) sign next to the title, when noted with a ***, next to the title, programing ranges from \$2.00-\$5.00



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Aquafitness- An invigorating water workout. Ideal for all fitness levels. No swimming required

Zumba – This class offers fun music to keep the excitement high while keeping the impact low Friday's 5:30-6:30pm in ADR.

University of Michigan-Flint Rec Center

401 Mill Street, Flint, MI 48502
(810) 762-3441



Enhance Fitness (1 hour) – A fun, energizing class geared toward improving overall functioning and well-being. Improve your cardiovascular fitness, strength, flexibility and balance!

TIMES & LOCATIONS:

Hasselbring Senior Center

1002 Home Ave. Flint, MI
(810) 766-7128 Mon, Weds, & Fri 9-10 am



Carriage Town Ministries 605 Garland St Flint, MI
Tuesday 2:30-3:30 pm

Flint Farmers' Market- Tuesdays &

Thursdays 10:00-11:00 am
300 E. First St Flint, MI
(810) 232-1399



Arthritis Foundation Exercise Program (1 hour) A low-impact physical activity program proven to reduce pain and decrease stiffness. The routines include gentle range-of-motion exercises that are suitable for every fitness level!

Grand Blanc Senior Center:

Tuesday & Thursdays 10am – 11am

Swartz Creek Senior Center:

Fridays 11am – 12pm

Eastside Senior Center:

Wednesdays 10am – 11am



Forest Township Senior Center:

Wednesdays 12:30pm–1:30pm



Questions?
Email
commit2fit@flint.org

YOUR \$\$\$ AT WORK

- GCMS held a second special follow-up meeting to address practice issues related to HAP products
- GCMS met with executive staff from several payers to address member practice issues
- GCMS members presented pro-physician and pro-patient positions on several legislative bills, including Maintenance of Certification, auto no-fault, GME, MAPS, opioid issues
- GCMS held Town Hall on Avoiding Fraud and Abuse
- GCMS supported medical economic, maintenance of certification, hassle factor, public health issues at MSMS House of Delegates
- GCMS Delegation represented members at MSMS House of Delegates
- GCMS Delegation provided input to MSMS on its re-visioning plan
- GCMS hosted an EPA update on Flint water issues
- GCMS members spoke on several occasions to community via the Mayor of Flint's radio Town Halls

HAPPY BIRTHDAY DOCTOR

| | | | |
|-------------------------------|----|------------------------------|----|
| Bala Aysola MD | 1 | Edmund Louvar MD | 12 |
| James Graham MD | 1 | Sayed Osama MD | 12 |
| Anthony Miltich MD | 1 | Marigowda Nagaraju MD | 14 |
| Siva Sankaran MD | 1 | Gary Keoleian MD | 15 |
| P. C. Shetty MD..... | 1 | Monee Rassolian MD | 15 |
| Aftab Aftab MD..... | 3 | Peter Mikelens MD..... | 16 |
| T. Trevor Singh MD..... | 3 | Lisa Ochoa DO..... | 16 |
| Ernesto Duterte MD..... | 4 | Stephen Morris MD..... | 17 |
| Sudarsan Misra MD | 4 | Madhusudana Tummala MD | 17 |
| Vivekanand Palavali MD..... | 4 | Fayez Kotob MD | 20 |
| My Le Shaw MD | 4 | Ronald Sparschu MD..... | 21 |
| Yazdi Sidhwa MD | 4 | John MacKenzie MD | 22 |
| Brian Bhagat MD | 6 | Ethiraj Raj MD..... | 22 |
| Nitin Malhotra MD..... | 6 | Michael Kia DO | 25 |
| Edilberto Moreno MD..... | 7 | Stacey McEwen DO..... | 25 |
| Ravikumar Peddireddy MD | 10 | Alan Rice MD..... | 26 |
| Raouf Mikhail MD | 11 | Sasikala Vemuri MD | 26 |
| Tommy Stevens MD | 11 | Dale Wilson MD | 27 |
| Sudhir Arumanla MD | 12 | Julio Badin MD | 28 |
| Jitendra Katneni MD | 12 | Molly McConachie MD..... | 30 |
| Shah-Naz Khan MD | 12 | | |

JUNE

Did you recognize...
Michael Beer, MD



Announcement

GCMS members now entitled
to a 15% discount on automobile
and homeowners insurance.

For details, contact:

POTTER & ROOSE
INSURANCE

810-767-8590

Providers of insurance for the GCMS & its
members for 50 years.

906 Mott Foundation Bld., Flint MI 48502

Your
HEALTH CARE LAW FIRM



Wachler & Associates represents healthcare providers, suppliers, and other individuals in Michigan and nationally in all areas of health care law, including:

- **Provider Contracting**
- **RAC, Medicare, Medicaid and Commercial Payor Audits**
- **Billing and Reimbursement**
- **Stark Law, Anti-Kickback Statute, and Fraud & Abuse Compliance**
- **Licensure, Staff Privilege and Credentialing**
- **Physician and Physician Group Issues**
- **Corporate and Transactional Matters**
- **Regulatory Compliance**
- **Healthcare Litigation**
- **Healthcare Investigations**
- **Fraud and False Claims Defense**
- **Provider Participation/Termination Matters**
- **HIPAA and HITECH Compliance**

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