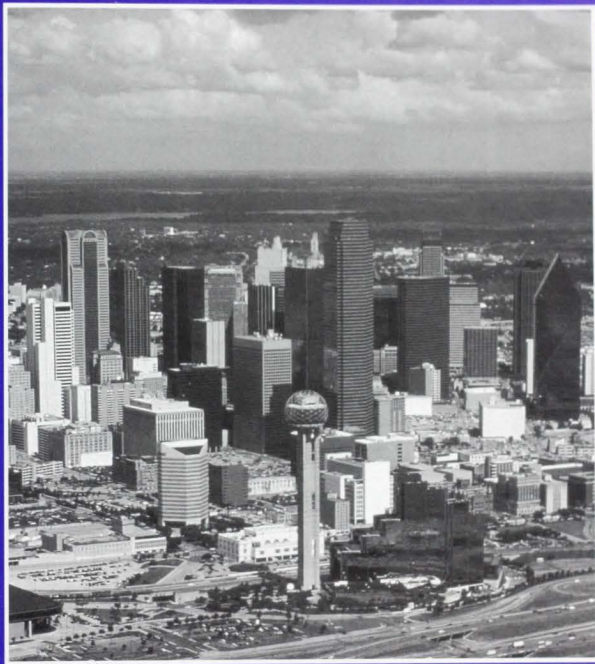


May, 1995

The Journal of the Texas Osteopathic Medical Association

XXXXVII, No. 5

Dallas ... the site of TOMA's 96th Annual Convention and Scientific Seminar



Photograph courtesy of the Dallas Convention & Visitors Bureau

Surviving on the Frontiers of Medicine
June 15-18, 1995
Registration Form Inside This Issue

**Hyperbaric Oxygen
therapy Story Inside**



THIS IS NOT WHERE YOU WANT TO GIVE DICTATION.

Your most important partner is a flexible, cost-effective professional liability insurance program. That's why you need DEAN, JACOBSON FINANCIAL SERVICES.

In your medical practice, you respond to questions with the confidence that comes from experience. At DEAN, JACOBSON FINANCIAL SERVICES, in association with Healthcare Insurance Services, Inc., we answer your professional liability needs with the confidence that comes from our experience.

Confidence and experience. Use yours to protect your patients. We'll use ours to protect you.

Call us. Let's discuss answers.

The only financial services and insurance advisors endorsed by TOMA.

DEAN, JACOBSON FINANCIAL SERVICES
(817)335-3214

Dallas/Fort Worth Metro (817)429-0460
P.O. Box 470185, Fort Worth, TX 76147
(800)321-0246

In association with:
Healthcare Insurance Services, Inc.
A Galinsky Group Company





For Your Information

OSTEOPATHIC AGENCIES:

American Osteopathic Association 312/280-5800

Washington Office 800/621-1773

American Osteopathic Healthcare Association 202/544-5060

Physician's Choice Medical Malpractice 800/962-9008

Plan, Jacobson Financial Services: 703/684-7700

For Premium Rates, 800/366-1432

Enrollment & Information 1-800/321-0246

OMA Major Medical Insurance 1-800/321-0246

OMA Disability Insurance Program 1-800/321-0246

OTHSC/Texas College of Osteopathic Medicine 817/735-2000

Dallas Metro 429-9120

Medicare Office:

Part A Telephone Unit 214/470-0222

Part B Telephone Unit 903/463-4495

Profile Questions 214/766-7408

Provider Numbers:

Established new physician (solo) 214/766-6162

Established new physician (group) 214/766-6163

All changes to existing provider

number records 214/766-6158

Medicaid/NHIC

Texas Medical Foundation 512/343-4984

Medicare/CHAMPUS General Inquiry 512/329-6610

Medicare/CHAMPUS Beneficiary Inquiry 800/725-9216

Medicare Preprocedure Certification 800/725-8293

Private Review Preprocedure Certification 800/725-7388

Texas Osteopathic Medical Association 512/388-9400

in Texas 800/444-TOMA

FAX No. 512/388-5957

OMA Physicians Assistance Program 817/294-2788

in Texas 800/896-0680

FAX No. 817/294-2788

in Texas 800/444-TOMA

OMA Med-Search

EXAS STATE AGENCIES:

Texas Health and Human Services Commission 512/502-3200

Department of Health 512/458-7111

Texas State Board of Medical Examiners 512/834-7728

Registration & Verification 512/834-7860

Complaints Only 800/201-9353

Texas State Board of Pharmacy 512/832-0661

Texas Workers' Compensation Commission 512/448-7900

Medical Review Division 512/440-3515

Texas Hospital Association 800/252-9403

Texas Department of Insurance 512/463-6169

Texas Department of Protective and

Regulatory Services 512/450-4800

State of Texas Poison Center for

Doctors & Hospitals Only 713/765-1420

Houston Metro 654-1701

FEDERAL AGENCIES:

Drug Enforcement Administration: 512/465-2000 ext. 3074

For state narcotics number 214/767-7250

For DEA number (form 224)

CANCER INFORMATION:

Cancer Information Service 713/792-3245

in Texas 800/392-2040

TEXAS D.O.

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

FEATURES

	Page
President's Corner	5
Board of Trustees Spotlight: Kenneth S. Bayles, D.O.	8
TOMA's 96th Annual Convention & Scientific Seminar -	
Schedule of Events and Registration Form	10
TOMA Convention Speakers Introduced	16
Hyperbaric Oxygen Therapy	19
"You Belong to the Largest HMO in Texas -	
Texas Workers' Compensation Commission,"	
By Richard A. Friedman, D.O., F.A.A.D.E.P.,	
and Peter N. Rogers, Attorney-at-Law	26
In Memoriam	28
Seaborn E. Jones, D.O.; Mrs. Bessanne W. Anderson;	
Stephen A. Stern, D.O.; Roy Leon Rhodes, D.O.	
TOMA's 1995 Legislative Day: A Wrap-Up	29

DEPARTMENTS

Calendar of Events	4
Membership-on-the-Move	6
ATOMA News	25
District Stars	29
What's Happening in Washington, D.C.	30
Self's Tips & Tidings	32
News from the University of North Texas Health	
Science Center at Fort Worth	34
Texas Society of the ACOFP Update	36
News From Osteopathic Health System of Texas	38
Public Health Notes	40
Practice Locations in Texas	42

TOMA OFFICERS:

T. Eugene Zachary, D.O., President
 William D. Hospers, D.O., President-Elect
 Arthur J. Speece, III, D.O., Vice President
 Brian G. Knight, D.O., Immediate Past President
 Jerry E. Smola, D.O., Past President
 Mark A. Baker, D.O., Speaker, TOMA House of Delegates
 Monte E. Troutman, D.O., Vice Speaker, TOMA House
 of Delegates

BOARD OF TRUSTEES:

Nelda N. Cuniff, D.O.
 Hector Lopez, D.O.
 R. Greg Maul, D.O.
 Rodney M. Wiseman, D.O.
 Kenneth S. Bayles, D.O.
 James E. Froelich, III, D.O.
 Daniel W. Saylak, D.O.
 Irvin E. Zeitler, D.O.
 Jim W. Czewski, D.O.
 Joseph A. DelPrincipe, D.O.
 Larry J. Pepper, D.O.
 Bill V. Way, D.O.

EX OFFICIO MEMBERS OF THE BOARD OF TRUSTEES:

Joseph Montgomery-Davis, D.O., Consultant
 Concerning Health Care Issues
 Terry R. Boucher, Executive Director
 Student/Doctor Brent Sanderlin



May, 1995

TEXAS D.O. is the official publication of the Texas Osteopathic Medical Association.

Published eleven times a year, monthly except for July. Subscription price is \$50.00 per year.

TEXAS D.O. does not hold itself responsible for statements made by any contributor. The advertising contained in this magazine is not necessarily endorsed by the Texas Osteopathic Medical Association.

Printed by Cockrell Printing Company, 301 Galveston, Fort Worth, Texas 76104.

Published by
TEXAS OSTEOPATHIC MEDICAL
ASSOCIATION
VOLUME XXXXII – No. 5–
May ISSN 0275-1453
Publication Office—One Financial Center
1717 North IH 35, Suite 100
Round Rock, Texas 78664-2901
Phone: 512/388-9400 or
1/800/444-TOMA in Texas
Fax No. 512/388-5957
Copy deadline – 10th of month
preceding publication

Terry R. Boucher
Executive Director/Editor
D. J. Kyle
Associate Executive
Director/Associate Editor
Janet Dunkle
Executive Secretary/Bookkeeper
Heather Alexander
Part-time Assistant
Paula S. Yeamans
Membership Coordinator
Wendy Cucorullo
Receptionist
John Sortore
Field Representative
Lydia Kinney
Staff Writer

Calendar of Events

MAY 18-21

89th Annual Convention
Sponsored by Virginia Osteopathic Medical
Association
Location: Williamsburg, Virginia
Contact: Dr. Peter Gent, Sec.-Treas.
11900 Hull Street Road
Midlothian, VA 23112
804-744-3551

18-21

"15th Annual Primary Care Update"
Sponsored by University of North Texas
Health Science Center at Fort Worth
Location: Sheraton South Padre Island Resort
South Padre Island, Texas
Hours: 18 CME hours – Category 1-A,
AOA
Contact: Pam McFadden, Program Director
817-735-2539

JUNE 15-18

TOMA 96th Annual Convention & Scientific
Seminar
Sponsored by Texas Osteopathic Medical
Association
Location: Grand Kempinski Hotel
Dallas, TX
Hours: 28 Category 1-A anticipated
Contact: Texas Osteopathic Medical
Association
512-388-9400 or 800-444-8662

16-18

Annual Meeting
Sponsored by Colorado Society of
Osteopathic Medicine
Location: Snowmass Conference Center
Snowmass at Aspen, Colorado
Hours: 18 CME hours – Category 1-A,
AOA
18 hours AAFP prescribed course
credits anticipated
Contact: Patricia Ellis
303-322-1752; fax 303-322-1956

JULY 13-16

"First Annual Surgery Update for the
Primary Care Physician"
Sponsored by the University of North Texas
Health Science Center at Fort Worth
Location: Inn of the Mountain Gods
Mescalero, New Mexico
Hours: 18 CME hours – Category 1-A,
AOA
Contact: Pam McFadden, Program Director
817-735-2539

28-30

American Osteopathic Association House
Delegates Meeting
Location: Chicago, Illinois
Contact: AOA, 800-621-1773

AUGUST 3-6

37th Annual Convention and 22nd Mid-Year
Seminar
Sponsored by Texas Society of the American
College of Osteopathic Family Physicians
Location: Arlington Marriott
Arlington, Texas
Hours: 28 CME hours – Category 1-A,
AOA applied for
Contact: Dawn Keilers, Executive Director
Texas Society of the ACOFP
800-825-8967

OCTOBER 14-18

TOMA Group Trip to AOA 100th Annual
Convention and Scientific Seminar
Location: Orlando, Florida
Contact: TOMA
800-444-8662

19-22

TOMA Postconvention CME Trip to
Ocho Rios, Jamaica
Contact: TOMA
800-444-8662

Articles in the "TEXAS D.O." that mention the Texas Osteopathic Medical Association's position on state legislation are defined as "legislative advertising," according to Tex Govt Code Ann §305.027. Disclosure of the name and address of the person who contracts with the printer to publish the legislative advertising in the "TEXAS D.O." is required by that law: Terry R. Boucher, Executive Director, TOMA, One Financial Center, 1717 North IH 35, Suite 100, Round Rock, Texas 78664-2901.



President's Corner

By T. Eugene Zachary, D.O., President
Texas Osteopathic Medical Association

"Physician of the Day" at the State Capitol

Recently, I had a truly marvelous experience. In fact, I had two such experiences. One of these was the opportunity to serve as "Physician of the Day" at the State Capitol. This service has been provided at the Capitol for several years by the Texas Academy of Family Physicians (TAFP). The TAFP in past years has arranged for Family Physicians to provide medical services to members of the legislature, their family members, their office staff, capitol employees, and visitors to the capitol. This service is on-going during the weeks that the legislature is in session.

This year, the program has several co-sponsors, one of which is TOMA. TAFP arranged for TOMA to participate by designating one week for osteopathic physicians to be the Physician of the Day. TOMA's efforts were assisted by the support of the Texas Society of ACOFP (American College of Osteopathic Family Physicians), which coordinated the osteopathic physicians who worked in this program for that week. The State Senate adopted a resolution, sponsored by Senator Mike Moncrief, that designated the first day of that week as "Osteopathic Medicine Day at the Capitol."

It was a most enjoyable experience. I had a great time just being there and observing the routine of Capitol business. A third year medical student, Brent Sanderlin, who is also the President of the Student Government Association at UNTHSC/FW-TCOM, assisted me all day. We were both introduced on the floor of the Senate and the House of Representatives, and had our pictures made with Senator Moncrief and Representative Homer Dear, both from Fort Worth. The Capitol nurse, Tim Flynn, R. N., was very helpful and a delightful person to work with as well.

I sincerely hope that each of you gets the opportunity to serve in this program sometime in your career. Everyone was extremely nice and they really appreciate your being there and providing that service. I saw quite a few patients, and had the opportunity to administer an OMT to one patient for a specific musculoskeletal problem.

It was a pleasure to be the first osteopathic physician to serve as "Physician of the Day" on "Osteopathic Medicine Day" during our first osteopathic week in this program. It was an experience that I will never forget.

In the beginning of this column, I mentioned that I had two experiences. The other gratifying experience was to have the opportunity to present oral testimony to the Senate Health and Human Services Committee and to the House of Representatives Public Health Committee on the Hospital Staff Privileges Bill that TOMA has introduced this year. The bill was S.B. 965 sponsored by Senator Carlos Truan in the Senate, and H.B. 585 sponsored by Representative Jack Harris in the House. Both bills are the same, they just have different numbers.

"TOMA needs more than just a few of you to be prepared to present and rally support in the legislature for issues that affect our profession."

The main reason that this experience was so special to me is because it is such a different world at the Capitol. You have an opportunity to meet some really nice people that you read about in the newspaper and see on television. Not only can you meet and visit with legislative staff, but if your timing is good, you can also meet and visit with your own senator and/or representative. You can make them aware of your own personal views on various issues, and you can also let them know how you feel about issues that affect your livelihood – the practice of medicine. I had not taken advantage of that opportunity before. Both of these experiences were really neat to me.

On "Osteopathic Medicine Day at the Capitol" (March 27, 1995), TOMA held a "Legislative Day at the State Capitol." The principle objective of this day was to establish an effective osteopathic political presence in Austin. All D.O.'s and their spouses were invited to attend this mini-seminar which began at 9:00 a.m. and ended about 3:30 p.m. on the same day. The attendance was far below what we expected and what we had hoped for. There were eight D.O.'s, six spouses or significant others, and two non-physicians who are a part of the Osteopathic Health System of Texas. TOMA greatly appreciates those of you who attended, but I am greatly disappointed in those of you who did not. As I was serving as Physician of the Day at the Capitol that day, I could not attend.

TOMA needs more than just a few of you to be prepared to present and rally support in the legislature for issues that affect our profession. A few D.O.'s and spouses, and the Executive Director and the Associate Executive Director cannot do it all. We need a cadre of osteopathic people who are trained and ready to help the profession when the need arises. This cadre of people could make a tremendous difference in the legislation that ultimately gets passed and signed into law. They could help create a positive effect on our practice of medicine. The legislators need to know what we need, what we want, and we need every one of you to tell them.

When the next TOMA Legislative Day is scheduled, please consider being one of the D.O.s or spouses who attends and learns how to be prepared to be an effective osteopathic political presence in Austin.

The entire osteopathic profession needs your help and participation – **YOU need your help and participation!**

IMMUNIZE YOUR LITTLE TEXAN BY TWO SHOTS ACROSS TEXAS

Shots Across Texas is Succeeding Infant Immunization Rate Jumps From 30 Percent to 55 Percent

Infant immunization rates in Texas have received a healthy shot in the arm, according to a study sponsored and analyzed by the Texas Department of Health (TDH).

Dr. David R. Smith, Texas Commissioner of Health, attributed the improved immunization rates largely to the ongoing success of Shots Across Texas, a statewide initiative begun over a year ago. Organized by the TDH, the campaign is supported by the Texas Osteopathic Medical Association, the Texas Medical Association and hundreds of other businesses, agencies, associations and civic groups.

"This initiative has helped to make immunizations available in Women, Infant and Children (WIC) Nutrition Program clinics, developed an extensive network of grassroots immunization coalitions, funded special inner-city immunization projects and helped make vaccine more accessible throughout Texas," said Dr. Smith.

Survey results show that 55 percent of Texas children age two and younger are immunized. Among the three major ethnic groups in Texas, Mexican-American children enjoy the highest rate of age-appropriate immunizations at 59 percent. Among Anglo children, that rate is 57 percent, while 39 percent of African-American children in this age group are adequately immunized.

"Shots Across Texas is making a measurable difference in the number of children who are receiving the immunizations

they need," Dr. Smith noted. "Although there is still a deal more to be done, we have made a significant improvement in immunization rates."

The survey, conducted by the Texas A&M Public Policy Institute on behalf of TDH, analyzed improvements in immunization rates from the fall of 1993 to the fall of 1994. The survey also indicated:

- Approximately 70 percent of Texas' 2-month-olds received their recommended shots on time. This represented a 16 percent increase in the span of one year among immunized infants of that age group.
- Among four-month-old children, 54 percent were appropriately immunized, representing a 29 percent increase statewide from 1993 to 1994.
- At six months, 41 percent of Texas infants were immunized on time, a 37 percent increase since 1993.

The goal of the initiative is to achieve a 90+ percent infant immunization rate by 1996.

For more information about Shots Across Texas, or general information about immunizations, call the Texas Department of Health at 800-252-9152.

Membership On-The-Move

SOMETHING NEW FOR TOMA MEMBERS!! We are now members of the Anheuser-Busch Theme Park CLUB USA. With your "Club Card" you are entitled to several membership privileges and discounts at all Anheuser-Busch Theme Parks. To receive your card, call Paula in Membership at 1-800-444-8662 or pick up brochure June 15-18 at the TOMA 96th Annual Convention and Scientific Seminar in Dallas.



BUSCH GARDENS Sea World



The hours may be long, but the Monet's worth it.



*Detail of Claude Monet,
POINTE DE LA HÈVE, AT
LOW TIDE, oil on canvas, 1865,
courtesy of the
Kimbell Art Museum.*

In Fort Worth you'll find the biggest
osteopathic facility in the state: Osteopathic Medical Center of Texas
(OMCT). And you'll find it right in the middle of our city's Cultural District.
World-renowned art museums, Japanese Gardens and quaint red-brick
streets make coming to work a pretty picture. It's our commitment to wellness that
expands the bigger picture – in our hospital, in our teaching and in our
community. At OMCT we've always believed
"prevention works wonders." It's why we do what we do. And it's why
we treat our patients differently – from the very beginning.
Come and out, see why OMCT
is the D.O. way to go.

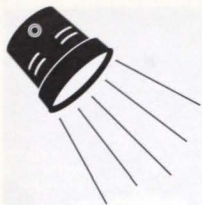


Osteopathic Medical Center of Texas

1000 Montgomery, Fort Worth, Texas 76107
1-800-725-OMCT (6628)
In Fort Worth, (817) 731-4311

Full-service 265-bed regional referral hospital with more than 850 employees
Postgraduate educational programs, including OB/GYN, internal medicine, surgery
and family practice, radiology, urology and manipulative medicine
Full range of outpatient services, including surgery, pulmonary and cardiac
rehabilitation, chemotherapy and physical therapy
Complete obstetrical care, including a neonatal intensive care unit
Cardiac surgery, hyperbaric chamber, renal dialysis
24-hour emergency room, separate intensive care and critical care units
Primary teaching hospital of University of
North Texas Health Science Center at Fort Worth





SPOTLIGHT

TOMA Board of Trustees

Each month TOMA spotlights a board member for his or her wisdom and commitment to the osteopathic profession in Texas. TOMA extends a sincere thanks to every board member who has served and is serving as a member of the TOMA Board of Trustees.



Kenneth S. Bayles, D.O.

Dr. Kenneth Bayles of Dallas was never indecisive as to which career he would eventually pursue. "I was raised in an osteopathic family, with both my grandfather and father being osteopathic general practitioners," he says. "I grew up going to the hospital making rounds with them at a very young age, and later working in their office. From a very early age I knew that I wanted to be a physician, and I focused my attention and my goals to that end," Dr. Bayles notes.

Certified in Orthopedic Surgery, Dr. Bayles practices at the Center for Fracture Treatment and Orthopedic Surgery in Dallas. He is also an assistant clinical professor in the Department of Surgery at UNTHSC-FW/TCOM.

His feelings about the osteopathic profession in general are indicative of a strong background in the philosophy and tenets of the profession. "I believe that the osteopathic physician, when practicing his skill, treats patients in their entirety. Even in my own practice of orthopedics, I try to envision each patients' whole health care," says Dr. Bayles. He adds, "The osteopathic

physician also has manipulation in his or her armamentarium of treatment modalities. Again, in my specialty of orthopedic surgery, I find this very useful in total patient care. I believe that the osteopathic physician approaches the patient from a wellness standpoint as well as treating his illness. We all must remember: Doctor, do no harm."

An active member of the Texas Osteopathic Medical Association, Dr. Bayles has served as a member of the Board of Trustees since 1993, and as a member of the House of Delegates for approximately 10 years. He has served on numerous TOMA committees throughout the years, and is currently a member of the Socioeconomics Committee, the Public Information Committee and the Strategic Planning Committee.

"We have to treat the patient with diligence, care and dignity and, in all aspects, treat the patient as we would want to be treated ourselves."

Dr. Bayles' involvement with TOMA began during his residency days. He feels that TOMA has been instrumental in monitoring legislation, both federal and state-wide, and says that "TOMA is constantly in contact with the physicians, especially the Board, in order to disseminate information to our membership. I would like to take this time to compliment the TOMA staff and administration for their diligence."

Dr. Bayles expresses strong optimism regarding TOMA's search for property in Austin. "As you all know, we have been in search of a location within the City of Austin, and as close to the

Capitol, as possible. You may not know that we have acquired a building pending approval of inspection and financing, which is within a physician's voice of the Capitol. We are certainly hoping that our new location will gain the ears of our legislators."

Dr. Bayles is a 1975 graduate of the University of Osteopathic Medicine and Health Sciences - College of Osteopathic Medicine and Surgery, Des Moines, Iowa. He interned at Oakland General Hospital in Michigan, and completed orthopedic surgery residencies at Oakland General Hospital and Dallas/Fort Worth Medical Center - Grand Prairie.

His memberships include TOMA District V, in which he has held executive office, including that of president of the American Osteopathic Association, American Osteopathic Academy of Orthopedics, Texas Medical Foundation, American College of Osteopathic Surgeons, Midwest Osteopathic Orthopedic Society, in which he is a past president and the International Rescue Committee: Poland. Hospital affiliations include Dallas Family Hospital, where he is head of the Orthopedic Division of Department of Surgery; Dallas/Fort Worth Medical Center - Grand Prairie Department of Surgery; Garl Community Hospital, Department of Surgery; and Tri-City Health Center Hospital, Department of Surgery.

Dr. Bayles is involved in a variety of other activities. He works with the high school student vocational program at several of the high schools in the Dallas and Duncanville Independent School Districts, and has had high school students working in his office for nearly 15 years, as well as students from various medical-assistant colleges. Additionally, students from osteopathic colleges across the U.S. and interns/residents rotate on an educational basis through his office. "At each step

Dr. Les Sandknop Elected Chief-of-Staff



Les T. Sandknop, D.O., a certified family practitioner in Rockwall and Quinlan, has been selected chief-of-staff for Lake Pointe Medical Center.

The position is elected annually from among Lake Pointe's attending staff of physicians. This is the third time Dr. Sandknop has been elected to the post, which carries a term coincident with the calendar year.

As chief-of-staff, Dr. Sandknop serves as the ex-officio head of all quality assurance committees. He has the responsibility of chairing the Medical Executive Committee, and appointing chairs for both the medical and surgical sections as well as heads for each section's various committees. Additionally, Dr. Sandknop's signature will be required for the final acceptance of physicians seeking staff privileges. He will be involved with monitoring the physicians as well as acting as their representative to Lake Pointe's Administration. Dr. Sandknop will work to ensure the documentation from physicians is thorough and prompt and

will oversee its verification. Dr. Sandknop is one of the physicians who led the campaign resulting in the construction of Lake Pointe Medical Center. In 1980, he opened his solo practice on Ridge Road and two years later, began his Quinlan practice at the Westlake Clinic. Soon, he will be moving his office down the street into the Lake Pointe Health Science Center when construction is completed.

"Lake Pointe continues to grow and change in response to the area's dynamic growth and the evolution of the health-care delivery system," Dr. Sandknop said. "Especially at such a time, the chief-of-staff needs to foster communication and promote unity. It's a vital time in the hospital's history to be in this position."

Recent changes at Lake Pointe include a new emergency room director, John Mackenzie. Adaptations have been made to accommodate the hospital's increasing surgery volume. Growth also continues in Lake Pointe's home health and extended care services.

TOMA congratulates Dr. Sandknop on his election. ■

Legislation To Curb Lawsuits Passed By Texas House

A bill which would cut down on frivolous medical malpractice lawsuits has been approved by the Texas House of Representatives, and sent to the Senate. The bill raises from \$2,000 to \$5,000 the amount of bond that individuals filing such suits are required to post. The legislation also would require the plaintiffs to provide expert medical reports in support of their claims, and tightens the definition of who is considered a medical expert.

According to the bill's sponsor, Representative Todd Hunter, D-Corpus Christi, "We have some provisions in there that toughen the standards, so you'll see a decline in claims and a focus on the claims that mean the most."

The House also approved a bill allowing hospitals in cities with populations of 45,000 or more to commission their own police forces. Security officers would receive the powers of peace officers, authorizing them to carry weapons, make arrests, and receive various benefits if killed

these students closer to the osteopathic profession and introduce to a gentle way of patient care," Dr. Bayles.

Dr. Bayles lectures extensively around the world, and has spent a great deal of time in Poland, lecturing at the medical schools and hospitals. He has lectured at medical schools in the Caribbean and is attempting to organize a rheoepedic exchange program.

Regarding the challenges facing osteopaths today, Dr. Bayles cites increasing governmental control over the practice of medicine. "The advent of the managed-care form of medicine is taking an increased toll as far as delegation of patient care. New OSHA regulations on how to run your office and protect both patients and staff are causing an increase in costs but improving the quality of care. We have the Americans With Disabilities Act with which we must comply, and multiple state and federal agencies watching over our shoulders." Dr. Bayles stresses that "with all these constraints on the practicing osteopathic physician, we must still always remember that the patient comes first. We have to treat the patient with respect, care and dignity and, in all respects, treat the patient as we would want to be treated ourselves."

When speaking of his own practice, which is located in the innercity of Dallas, Dr. Bayles notes, "In our general osteoepedic practice, we see a variety of patients with work-related injuries and personal injuries, such as fractures and joint replacements. I am a strong advocate of the Medicaid system and see a fair volume of indigent-care-type patients. We are currently expanding our practice and are in active search of an osteoepedic surgeon."

Dr. Bayles' wife, Shirley, who is active in ATOMA District V and is currently ATOMA Vice President, manages his office and assists in the treatment and care of patients in her capacity as a nurse. "She is an asset to my practice as well as an asset to ATOMA," notes Dr. Bayles.

His hobbies include flying helicopters and fixed-wing airplanes, the Boy Scouts of America and weight-lifting.

We extend our sincere appreciation to Dr. Bayles for his continuous efforts and work on behalf of the osteopathic profession in Texas. ■

Texas Osteopathic Medical Association
presents the
96th Annual Convention and Scientific Seminar
Surviving on the Frontiers of Medicine
June 15 - 18, 1995
John R. Bowling, Program Chairman

TOMA's Family Day Events

Bear Creek Golf Tournament



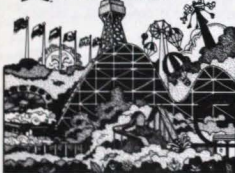
**HYATT
BEAR CREEK**
GOLF AND RACQUET CLUB

This year TOMA's golf tournament will be held at Bear Creek Golf and Racquet Club at the Hyatt Regency DFW. These two-18 hole championship golf courses were designed by Ted Robinson. Mr. Robinson is from California and a well-known architect of golf courses. Currently two of the courses he designed are listed in the top 100 courses nationwide.

TOMA's golf tournament will be held on the East Course, which is ranked the #12 public course in the state. Join TOMA conventioners for the "shotgun" style golf tournament at Bear Creek. The cost is \$85 per person and registration is limited to 75 persons on a first-come, first-served basis.

Six Flags Over Texas

**Six Flags
Over Texas**



Bigger than Disneyland...and a whole lot closer!

SIX FLAGS OVER TEXAS is a registered trademark of The Walt Disney Company.

Schedule of Events

Tuesday, June 13

- | | |
|--------------------|----------------------------------|
| 12:00 pm - 1:00 pm | TOMA Board of Trustees' Luncheon |
| 1:00 pm - 5:00 pm | TOMA Board of Trustees' Meeting |
| 6:30 pm - 9:30 pm | Caucus of the Districts |

Wednesday, June 14

- | | |
|--------------------|--------------------------------------|
| 8:00 am - 1:00 pm | TOMA House of Delegates Registration |
| 9:00 am - 5:00 pm | TOMA House of Delegates Meeting |
| 12:00 pm - 1:00 pm | TOMA House of Delegates Luncheon |
| 1:00 pm - 6:00 pm | ATOMA Board of Trustees' Meeting |
| 2:30 pm - 6:00 pm | Early Registration |

Thursday, June 15

- | | |
|---------------------|--|
| 7:00 am - 4:00 pm | Registration Open |
| 7:30 am - 9:25 am | Convention Opening Breakfast <u>including:</u> |
| | * Convention Welcome - T. Eugene Zachary, D.O. |
| | * Opening Remarks - John R. Bowling, D.O. |
| | * Health Care in Texas - Mike McKinney, M.D. |
| | * Medicaid Reforms and How They Affect Rural Areas - Ann Kitchen, J.D. |
| | * Panel Discussion - Above Speakers |
| 8:00 am - 4:00 pm | Exhibit Hall Open |
| 9:00 am - 12:00 pm | ATOMA House of Delegates Meeting |
| 9:30 am - 10:00 am | Break with Exhibitors |
| 10:00 am - 10:30 am | Current Trends in the Management of Nasal Allergies |
| 10:30 am - 10:55 am | Recent Developments in the Treatment of Onychomycosis - Douglas Vaughn, D.O. |
| 10:55 am - 11:20 am | Human Genome Project Report |
| 11:20 am - 11:45 am | Recent Advances in Hyperbaric Medicine - John Mills, D.O. |
| 11:45 am - 12:00 pm | Panel Discussion - Above Speakers |
| 12:00 pm - 1:15 pm | The Magic of Positive Self-Esteem Luncheon - Robert Lindberg, Ph.D. |
| 1:15 pm - 3:15 pm | Preventing Violence is Good Medicine - Ellen Taliaferro, Ph.D. |
| 3:15 pm - 3:30 pm | Break with Exhibitors |

Concurrent Workshops (Pre-Registration Required)

- | | |
|-------------------|--|
| 3:30 pm - 5:30 pm | Preceptor and Rural Rotation Supervisor Workshop - William Mygdal, Ed.D., and Marty Kinard, Ed.D. |
| 3:30 pm - 5:30 pm | Turning Stress into Positive Energy - Robert Lindberg, Ph.D. |
| 3:30 pm - 5:30 pm | Manipulative Management of the Patient with Fibromyalgia - Russell Gamber, D.O., and Raymond Pertusi, D.O. |
| 3:30 pm - 5:30 pm | Communicating on the Internet Highway, Part I - Regina Lee and Velma Jackman |
| 3:30 pm - 5:30 pm | EMS Directors - A. Duane Selman, D.O. |
| 4:30 pm - 5:30 pm | TACOPF Pacer's Meeting |
| 5:30 pm - 6:30 pm | UHS-COM Alumni Reception |
| 5:30 pm - 6:30 pm | UNTHSC/TCOM Alumni Reception |
| 5:30 pm - 6:30 pm | KCOM Alumni Reception |
| 5:30 pm - 6:30 pm | POPPs Reception |

3:00 pm - 7:00 pm SpectraCell Laboratories' Clinical Relevance of Uncovering Deficiencies Reception
 3:30 pm Sustainers' Party - Circle R Ranch

Friday, June 16

5:50 am - 7:50 am TACOFB Breakfast/Meeting
 7:00 am - 7:45 am Breakfast with the Exhibitors
 7:00 am - 1:00 pm Registration/Exhibit Hall Open
 7:45 am - 8:45 am What is Driving Health Care Change in the Market Place - Denny Shelton, President of the Central Group, Columbia/HCA
 8:45 am - 9:15 am The Physician's Response to Managed Care Initiatives - Mark Clanton, M.D.
 9:15 am - 9:45 am The Texas Osteopathic Response to Managed Care Initiatives - Peggy Duval, Executive Director of TIOPA
 9:45 am - 10:00 am Panel Discussion - Morning Speakers
 10:00 am - 10:45 am Break with Exhibitors
 10:45 am - 11:45 am Ten Steps to Optimizing Revenues in a Medical Practice - Mark Bower, CPA
 10:45 am - 12:45 pm ATOMA President's Installation and Luncheon
 1:45 am - 1:00 pm Lunch with Exhibitors

Daily Day Activities Begin

1:00 pm **Bear Creek Golf Tournament** (Buses depart for Bear Creek Golf and Racquet Club)
 2:00 pm Bear Creek Shotgun Starts
 7:00 pm Tournament Concludes - Buffet Begins
 "Wellness by Golf" Awards
 8:30 pm Buses Depart for the Grand Kempinski Hotel
 1:30 pm **Six Flags Over Texas** (Buses depart hotel)
 2:15 pm Arrive at Six Flags, On Your Own to Enjoy Park
 9:45 pm Buses Depart for the Grand Kempinski Hotel

1:30 pm Computer Lab

Ongoing **Shopping at the Galleria or Prestonwood Town Center**

Saturday, June 17

7:00 am - 8:00 am Breakfast with the Exhibitors
 7:00 am - 12:00 pm Registration/Exhibit Hall Open
 8:00 am - 8:45 am Psychopharmacology in the Geriatric Patient - Harvey Micklin, D.O.
 8:00 am - 10:00 am ATOMA Board of Trustees' Post Convention Breakfast Meeting
 8:45 am - 9:15 am Recent Innovations in the Treatment of Gerd & Motility - Rodney Camp, D.O.
 9:00 am - 11:00 am Texas Academy of Osteopathy Treatment Service
 9:15 am - 9:45 am New Frontiers in the Treatment of Allergy Induced Asthma - Laurence Cunningham, D.O.
 9:45 am - 10:15 am Ritual & Repetition: When is it Serious? - Barry Fenton, M.D.
 10:15 am - 10:45 am Break with Exhibitors
 10:45 am - 11:15 am Sleep Complaints Associated with Psychiatric Problems - Susan Esther, M.D.
 11:15 am - 11:45 am Nocturnal Enuresis - Ronald Hogg, M.D.
 12:00 pm - 1:30 pm AOA President's Luncheon - Howard Neer, D.O., AOA President-Elect
 1:30 pm - 3:30 pm Stroke Prevention and Management - William E. McIntosh, D.O.

Concurrent Workshops (Pre-Registration Required)

3:30 pm - 5:30 pm Retirement Planning - Jake Jacobson, CLU, ChFP
 3:30 pm - 5:30 pm A Texas Workers Compensation Update - Larry Edwards, CPCU
 3:30 pm - 5:30 pm Communicating on the Internet Highway, Part II - Regina Lee and Velma Jackman
 3:30 pm - 5:30 pm OMT Workshop - Diagnosis and Treatment of Lumbosacral Somatic Dysfunction - Gregory Dott, D.O.
 5:30 pm - 6:15 pm Texas Academy of Osteopathy Meeting
 6:30 pm - 7:00 pm President's Reception
 7:00 pm - 12:00 pm President's Banquet (Black tie optional) with Hotcakes - America's Band

Sunday, June 18

8:00 am - 1:00 pm Risk Management - Legal Prospective - Monte Mitchell, D.O., J.D.
 Difficult Physician Patient Relationships - Francis Blais, D.O.

Young and old alike will enjoy the Six Flags experience - it's entertainment for all ages. This multifaceted theme park has something for everyone with more than 100 rides, shows and games.

Enjoy the Texas sunshine at Six Flags Over Texas for only \$10 per person. This price includes round-trip transportation and entrance to the park.

Computer Lab

Friday afternoon receive some one on one time in TOMA's Computer Lab. Regina Lee and Velma Jackman from UNTHSC-TCOM will be available to assist you with "communicating on the internet highway."

This is not a structured educational session, it is merely an opportunity for you to ask questions and take advantage of the computers available to increase your knowledge of the "internet." Normally this type of training would cost you several hundred dollars but is free of charge to TOMA Annual Convention registrants.

Shopping Opportunities

If none of the above interest you ... there's always shopping! The Grand Kempinski Dallas offers complimentary transportation for a 3-mile radius from the hotel including both the Galleria and Prestonwood Town Center. Make arrangements for transportation through the hotel concierge.



Sustainer's Party at Circle R Ranch

Wear a sustainer's hat previously received or perhaps your own favorite cowboy hat to this year's Sustainer's Party. Thursday evening is not only the Sustainer's Party but "Old Hat Night." Western wear and "old hats" are appropriate attire for this event.

Circle R Ranch has planned a thrilling evening for TOMA's Sustainers including a western barbecue dinner, dancing to the Circle R Playboys and a Rodeo Show with "real" cowboys.

The Sustainer's Party is open to the Sustaining Member and one guest as a special "Thank You" for their support. If you would like to attend the Sustainer's Party and "Old Hat Night" it's not too late to join. To become a Sustaining Member, call Paula Yeamans, TOMA's Membership Coordinator at 800/444-8662 and she will sign you up!

(Continued on Page 12)

President's Banquet

The Annual President's Banquet (black tie optional) will be held on Saturday evening, June 17, from 7:00 p.m. until midnight. The banquet is held in honor of TOMA's outgoing President T. Eugene Zachary, D.O. As one of Dr. Zachary's final responsibilities, he selected the entertainment for his party!

HOTCAKES - America's Band will provide the musical entertainment for the banquet. **HOTCAKES** comes all the way from Austin, Texas, just to make this event a night to remember. Their music is "hot" for all ages! Wear your dancing shoes and be ready to dance the night away.

Babysitting Services

If you are in need of a babysitter during TOMA's 96th Annual Convention and Scientific Seminar, please call the Grand Kempinski Dallas' concierge at 214/386-6000 ext. 232. Reservations must be made at least *two weeks* prior to the date needed. The fees vary depending on the number of children and hours. The Grand Kempinski Dallas has been using this service for over 5 years and the babysitters will stay with the children in your hotel room.



HOTCAKES (featuring Meaghan O'Byrne)

Southwest Airlines

Southwest Airlines in cooperation with Texas Osteopathic Medical Association, is offering attendees to the Texas Osteopathic Medical Association's 96th Annual Convention & Scientific Seminar, a discount on both Southwest's low everyday unrestricted fares and Southwest's even lower restricted fares for travel on Southwest Airlines to the

Texas Osteopathic Medical Association's 96th Annual Convention & Scientific Seminar.

To take advantage of these discounts, reservations must be made by phoning Southwest Airlines Group Desk at 1-800-433-5368, Monday - Friday, 8am - 5pm. Call no later than **June 5, 1995**, and refer to identifier code **M81**.

96th Annual Convention Exhibitors and Educational Grantors

Platinum Exhibits

Apothe' Cure, Inc.
Dean, Jacobson Financial Services
Schering Sales Corporation/Key Pharmaceuticals
SpectraCell Laboratories, Inc.

Gold Exhibits

Boehringer Ingelheim Pharmaceuticals, Inc.
Central Pharmaceuticals, Inc.
Eli Lilly & Company
Lederle Laboratories
Mark T. Bower & Associates
Osteopathic Health System of Texas
TEI Computers
Wyeth-Ayerst Laboratories

Silver Exhibits

AC Medical
ACS Healthcare Information Systems
Bayer Corporation
Bock Pharmaceutical Company
Bristol-Myers Squibb
Center for Rural Health Initiatives
Ciba Geneva Pharmaceuticals
City of Austin
Coastal Physician Services

Cornish Medical Electronics
Curatek Pharmaceuticals
Doctors Hospital
Don Self & Associates
Environmental Health Center
Fisons Pharmaceuticals
Health Care Insurance Services, Inc.
Hoechst-Roussel Pharmaceuticals, Inc.
I.C. System
International Medical Electronics, Ltd.
Janssen Pharmaceutica
Kirkville College of Osteopathic Medicine
Knoll Pharmaceutical Company
Marion Merrell Dow
MBNA Marketing Systems, Inc.
McNeil Consumer Products Company
McNeil Pharmaceutical
MERCK
MURO Pharmaceutical, Inc.
National Heritage Insurance Company
Ortho Pharmaceutical Corporation
PARKE-DAVIS
Pfizer, Inc.
Physician Manpower Training Commission
Reed & Carnrick Pharmaceuticals
Rehabilitation and Workhardening Clinics
Sandoz Pharmaceuticals Corporation

Smithkline Beechman Pharmaceuticals
SMMI/Claims by Computer
Southwest & Johnson XRay Company
Texas Medical Association
Texas Medical Foundation
Texas State Board of Medical Examiners
Texas Workers' Compensation Insurance Fund
The Gladney Center
Thomas Computer Systems, Inc.
University of Health Sciences Foundation
US Army Medical Department
Wallace Labs
Whitby Pharmaceuticals
X-Ray Sales & Service Company, Inc.

Educational Grants

Allen & Hanburys Division of Glaxo Inc.
Bayer Pharmaceutical
DuPont Pharma
Eli Lilly & Company
Fisons Pharmaceuticals
Janssen Pharmaceutica
Rhône-Poulenc Rorer
Searle Pharmaceuticals
Smithkline Beechman Pharmaceuticals
The Upjohn Company

You need **TIOPA**

TEXAS INDEPENDENT OSTEOPATHIC
PHYSICIANS ASSOCIATION

TIOPA needs you.

With the arrival of managed care, physicians are searching for greater representation and a more influential voice. Texas Independent Osteopathic Physicians Association (TIOPA) is a physician-directed organization. It has recently expanded its network to help osteopathic physicians across Texas gain a competitive and organized negotiation presence. As a member, you'll benefit from:

- Joint Marketing and Promotion
- Managed Care Contract Review and Analysis

- Professional Autonomy
- Geographically Diverse Physicians Network

Join TIOPA, an organization established to promote and to support your independent practice in today's health care market.

Do it for yourself, for your practice and for other osteopathic physicians across Texas. For more information, write to TIOPA, 3715 Camp Bowie Boulevard, Fort Worth, Texas 76107, or call 817-377-8046, toll free 1-800-725-6628, or FAX 817-377-0827.

Disability Statement

Individuals needing special accommodations during TOMA's 96th Annual Convention and Scientific Seminar should contact the TOMA state office prior to **May 31, 1995**.

Texas Osteopathic Medical Association
One Financial Center
1717 N. IH-35, Suite 100
Round Rock, Texas 78664-2901
800/444-8662 or 512/388-9400

Refund Policy

All cancellations must be received in writing and will be charged a \$25 processing fee. Cancellations postmarked on or before **May 31, 1995**, will receive a full refund minus the \$25 processing fee. **Cancellations postmarked after May 31, 1995, will receive NO REFUND.**

Grand Kempinski Hotel Reservation Form

Texas Osteopathic Medical Association
June 12 - 17, 1995

Last Name _____ First Name _____
Organization _____
Street Address _____
City _____ State _____ Zip _____
Phone Number (____) _____ Sharing with _____

All rooms must be guaranteed by one night's advance deposit through check, money order or credit card, made payable to The Grand Kempinski Dallas. Please do not send currency. **Mail completed form and payment to The Grand Kempinski Dallas, 15201 Dallas Parkway, Dallas, Texas 75248, 214/386-6000.**

Please indicate the number of rooms needed and circle the preferred room type. All rates are subject to a 13% occupancy tax. Room types and special requests are subject to availability.

# Needed	Room Type	Rate	# Needed	Room Type	Rate
_____	Single	\$100	_____	One Bedroom Parlour	\$190
_____	Double	\$100	_____	Two Bedroom Parlour	\$300
_____	Triple	\$130	_____	Duplex Suite	\$270
_____	Quad	\$130	_____	Luxury Suites From	\$450
_____	Concierge Single	\$140	_____	Roll-Away	\$20
_____	Concierge Double	\$160			

Reservations must be received by: May 31, 1995.

All requests must be received by the date specified. After the cut-off date, rooms not reserved will revert to the hotel for general sale and requests will be taken on a space available basis at prevailing rates. Guaranteed rooms will be held until 6:00 a.m. the following day. Failure to cancel guaranteed reservations by 6:00 p.m., 72 hours prior to the arrival date will result in the forfeiture of the deposit.

Credit Card Guarantee

To guarantee your reservation by credit card, please check the credit card type and fill in the information below with your signature. Credit cards may be charged prior to your arrival.

☐ American Express ☐ Carte Blanche
☐ Discover ☐ Master Card
☐ Diner's Club ☐ Visa

Card Number _____
Expiration Date _____
Cardholder's Name _____
Cardholder's Signature _____
(Refundable if reservation is cancelled 72 hours prior to arrival date. Please be sure to keep your cancellation number.)
Arrival Day and Date _____
Departure Day and Date _____
(Check-in 3:00 p.m./Check-out 12:00 noon)

PRE-REGISTRATION FORM

Surviving on the Frontiers of Medicine

June 15-18, 1995

The Grand Kempinski Dallas - Dallas, Texas

2. AOA Category 1-A CME Hours anticipated

Pre-Registration Deadline is May 31, 1995

Please print or type.

Name _____ First Name for Badge _____

Address _____ City _____ State _____ Zip _____

College _____ Year Graduated _____ AOA # _____

Spouse/Guest Name _____ will accompany me.

Please select ONE of the following concurrent sessions for Thursday and Saturday afternoon:

Thursday, 3:30 - 5:30 pm

- ☐ Preceptor and Rural Rotation
☐ Turning Stress into Positive Energy
☐ Manipulative Management ... Fibromyalgia
☐ Communicating on the Internet Highway
☐ EMS Directors

Saturday, 3:30 - 5:30 pm

- ☐ Retirement Planning
☐ Texas Worker's Compensation Update
☐ Communicating on the Internet Highway
☐ OMT

CONVENTION PRE-REGISTRATION FEES:

- ☐ TOMA Members \$300
☐ 1st & 2nd Year in Practice \$200
☐ Spouse, Military, Retired, Associate \$150
☐ Interns and Residents \$0
☐ TOMA Non-Members \$500

REGISTRATION POSTMARKED AFTER MAY 31, 1995, OR ON-SITE:

- ☐ TOMA Members \$400
☐ 1st & 2nd Year in Practice \$300
☐ Spouse, Military, Retired, Associate \$250
☐ Interns and Residents \$0
☐ TOMA Non-Members \$600

TOMA Note - A luncheon ticket is required for the ATOMA luncheon. If you have not registered for the convention and want to attend the luncheon, you must buy a ticket. ☐ Yes, I need a ticket at \$20; ☐ No, I have registered.

Family Fun Day Options, Friday, June 16, 1995

(See separate article for more details on these events.)

Please choose a family event below. No clinical programs will be held on Friday afternoon.

- | | | |
|--|------------------------|---------------------|
| <input type="checkbox"/> Six Flags Over Texas - \$10 per person
(All children 12 years or under must be accompanied by an adult.) | Number Attending _____ | Total Cost \$ _____ |
| <input type="checkbox"/> Bear Creek Golf Tournament - \$85 per person | Number Attending _____ | Total Cost \$ _____ |
| <input type="checkbox"/> Handicap _____; Registration is limited! | | |
| <input type="checkbox"/> Computer Lab | Number Attending _____ | No Charge |
| <input type="checkbox"/> On Your Own (Shopping, Exploring, etc.) | Number Attending _____ | No Charge |

PAYMENT

- Registration \$ _____
TOMA Luncheon Ticket \$ _____
(If not registered)
Family Event \$ _____
TOTAL ENCLOSED \$ _____

Mail completed form and payment in full (only checks
and money orders accepted) to:

TOMA
One Financial Center
1717 N. IH-35, Suite 100
Round Rock, Texas 78664-2901

Introducing Speakers for TOMA's 96th Annual Convention and Scientific Seminar



Ellen Taliaferro, M.D., FACEP, will present "Preventing Violence is Good Medicine," as her topic during TOMA's 96th Annual Convention and Scientific Seminar, to be held June 15-18 in Dallas.

Co-founder and executive director of Physicians for a Violence-free Society, Dr. Taliaferro notes, "An epidemic of violence is sweeping our nation. Physicians for a Violence-free Society, a nonprofit organization, is founded on the premise that physicians and health care providers can and must participate in conquering this epidemic by employing violence-prevention strategies in their practice settings. Simply put: preventing violence is good medicine."

Dr. Taliaferro has been a practicing emergency physician for 23 years. She has served on the Board of Directors of the American College of Emergency Physicians and currently holds the post of Associate Professor of Surgery in the Division of Emergency Medicine at The University of Texas Southwestern Medical School. Dr. Taliaferro is an attending faculty physician at Parkland Memorial Hospital in Dallas, Texas.



The workshop "Manipulative Management of the Patient With Fibromyalgia" will be presented by **Russell G. Gamber, D.O.**, and **Raymond M. Pertusi, D.O.**

This presentation will cover diagnosis and treatment of the patient who hurts all over, with emphasis placed upon patients' description of their condition; what they say that will make physicians consider fibromyalgia. Diagnostic physical features will be demonstrated, and differential diagnosis and tests will be discussed. The presentation will also outline a tiered treatment plan, with emphasis on patient education, therapeutic interventions and counseling.

Dr. Gamber serves as an associate professor and as director of Core Rotation in the Department of Manipulative Medicine at UNTHSC-FW/TCOM. A 1969 graduate of Kirksville College of Osteopathic Medicine, Dr. Gamber is certified in family practice and occupational medicine. He also served on several UNTHSC-FW/TCOM committees including Recruitment and Admissions, Self Study, Continuing Education, Educational Goals and Osteopathic Research and Education and Scholarship/Awards.



Dr. Pertusi is a board certified rheumatologist who graduated from the New York College of Osteopathic Medicine, and did postdoctoral training at Seton Hall University Graduate School of Medical Education. He is an assistant professor in the Department of Medicine at UNTHSC-FW/TCOM.

"New Frontiers in the Treatment of Allergy Induced Asthma" will be presented by **Laurence W. Cunningham, D.O.**

The lecture will review the basic pathophysiology of both allergic and non-allergic asthma, and points to differentiate asthma from other obstructive diseases will be presented. Dr. Cunningham will also discuss increasing asthma mortality rates and outline highlights from the National Heart, Lung and Blood Institute recommendations of 1991. Additionally, the current therapy of allergic asthma including the use of newer drugs with emphasis on anti-

inflammatory treatment of inhaled corticosteroids and mast cell stabilizers will be stressed.

Dr. Cunningham practices in Jacksonville, Texas. He is an assistant clinical professor of medicine, Division of Pulmonary Diseases, Osteopathic Medical Center of Philadelphia, and medical director of the Intensive Care Unit at Springfield Hospital. He is a fellow of both the American College of Chest Physicians and the American College of Physicians. Dr. Cunningham is a 1982 graduate of Philadelphia College of Osteopathic Medicine.



Robert E. Lindberg, Ph.D., is the keynote luncheon speaker on Thursday, June 15 and will present "The Magic of Positive Self Esteem."

According to Dr. Lindberg, $P + E = R$ is the \$500,000 secret world class athletes, successful business people, and winners in all areas use to create excellence within themselves. It is also the exciting way that average people make dramatic improvements in their lives. $P + E = R$ is one of the five secrets he wants each participant to remember from this talk. Dr. Lindberg promises that he will use every psychological trick he knows to help participants remember $P + E = R$. Dr. Lindberg will also be conducting a concurrent workshop on Thursday, entitled "Turning Stress Into Positive Energy."

Dr. Lindberg notes that psychological research has indicated there are three factors which affect people's ability to be stress resistant. The bad news is that individuals who neglect these qualities flirt with job burnout, mental fatigue and emotional blues. The good news is that the people who develop these qualities stay positive and have surges of natural energy.

Dr. Lindberg is a media personality who has appeared on over 1,500 radio and television shows and is the author of three books, including his most recent *Feeling Good After Forty*. He is also a professional speaker who travels from coast to coast appearing as a keynote speaker at national conventions and regional meetings. At last count, he has given over 1,000 speeches.

On the more academic side, Dr. Lindberg is a former college professor at two universities, a winner of a national research award, and currently in private practice as a psychologist and a management consultant. As jokingly says, he is both a professional speaker and a professional listener.



Jake Jacobson, CLU, ChFC, will be presenting a workshop on "Retirement Planning." Topics covered during his presentation will include discussions on: 1) the types of qualified and non-qualified retirement plans available; 2) when each type is more appropriate; 3) how to determine the amount of money needed to live comfortably; 4) the best ways to accumulate wealth; and 5) how to manage investment portfolio before and after retirement.

Mr. Jacobson is a graduate of the American College and has earned CLU and the coveted ChFC designations. He is the President and founder of Jade Plan Services, Inc., a qualified retirement planning administration company. Mr. Jacobson has been active in pension and retirement planning since 1975, and has lectured at many workshops and seminars covering topics from design to administration. As the managing partner of Dean, Jacobson Financial Services, his expertise is invaluable as a team member in the firm's comprehensive total financial planning services, and as an instructor in the regular financial planning workshops conducted by the firm for the public.



A workshop entitled "A Texas Workers' Compensation Update" will be presented by **Larry S. Edwards, CPCU.**

Mr. Edwards notes that on January 1, 1991, a new Texas Workers' Compensation Law went into effect. The Texas Workers' Compensation Commission, created by the Texas Workers' Compensation Act to administer the law, began operations in April of 1990. Many rules are now being revised and updated, leading to a drastic change in how workers' compensation medical services are delivered, and how they are paid.

His presentation will discuss topics including progress made by the FDC to update the Medical Fee Guideline; revision of the authorization rule; improvement of the medical dispute resolution process; the newly adopted Mental Health Treatment guidelines; and the new Surgery Second Opinion rules. Efforts to develop and adopt a new Treatment Guideline and other "hot" issues concerning Texas Workers' Compensation medical aspects will be outlined.

Mr. Edwards is a Workers' Compensation Consultant with over 25 years of experience in the workers' compensation field - 20 years with the Texas Employers Insurance Association as a field claims adjuster, "home care" workers' compensation technical supervisor, and the medical services manager; and six years as a private consultant focusing on the medical aspects of the Texas Workers' Compensation Act.

Mr. Edwards is also the publisher of *The LSE Report*, a monthly newsletter covering the events and changes that affect the physicians' treatment of, and billing for workers' compensation cases.



"Ritual and Repetition: When is it Serious?" is the topic to be presented by **Barry J. Fenton, M.D.**

Dr. Fenton notes that Obsessive Compulsive Disorder is being recognized more and more frequently by primary care providers. Rough, raw hands, missing patches of hair, patterned bruises, depression and insomnia are all signs of patients suffering from Obsessive Compulsive Disorders. This lecture will offer new treatments readily available to help such patients, as well as useful medications and the behavioral therapy.

Dr. Fenton is a board certified psychiatrist currently in private practice in Dallas, Texas. He is on staff at Baylor/Richardson Medical Center. His previous appointments were the Medical Director at Terrell State Hospital and the Associate Professor of Psychiatry at the University of Texas Southwestern Medical Center, Dallas.



Ronald J. Hogg, M.B., Ch.B., D.C.H. will discuss "Nocturnal Enuresis" during TOMA's annual convention.

Nocturnal enuresis is a disorder that afflicts millions of children in the United States. This presentation will address possible etiologic factors and how these affect current therapeutic approaches. The possible mechanisms by which patients ultimately "grow out" of the condition will also be discussed.

Dr. Hogg is the Director of Pediatric Nephrology at Baylor University Medical Center in Dallas, and Clinical Associate Professor of Pediatrics at the University of Texas Southwestern Medical Center. He is also the Director of the Southwest Pediatric Nephrology Study Group.

Dr. Hogg received his Bachelor of Medicine and Surgery from Liverpool University Medical School in Liverpool, England, in 1970. He completed his residency in pediatrics at the Hospital for Sick Children in Toronto, Ontario, Canada. His residency was followed by a clinical fellowship in pediatric nephrology at the Hospital for Sick Children, and a research fellowship at the University of Texas Southwestern Medical School in Dallas. Dr. Hogg was Director of Pediatric Nephrology at Children's Medical Center in Dallas from 1977 to 1986 before moving to Baylor.



Monte Mitchell, D.O., will be discussing "Risk Management - Legal Prospective: during the Risk Management workshop on Sunday, June 18.

The objective of this presentation is instruction as to the major areas of medical malpractice, the reasons for malpractice claims in these specific areas, the anatomy of a malpractice suit, and practical means of protection against medical malpractice, including prophylaxis and alternatives to dispute resolution.

Dr. Mitchell is currently a seminarian at S.M.U.'s Perkins School of Theology and has an active interest in medical malpractice and First Amendment Law.

He attended the University of Texas System, graduating with a B.S. degree in 1977, and received his M.S. degree in 1981 from North Texas State University. Dr. Mitchell then matriculated at Texas College of Osteopathic Medicine, earning a D.O. degree in 1983. He interned at Dallas/Fort Worth Medical Center - Grand Prairie, and served a general surgery residency at Phoenix General Hospital and Osteopathic Medical Center of Texas. Dr. Mitchell attended Texas Wesleyan University School of Law for three years.



"Preceptor and Rural Rotation Supervisor Workshop" will be presented by **William Mygdal, Ed.D., and Marty Kinard, Ed.D.**

Each year the Faculty Development Center of Texas provides workshops that are designed to help physicians deal with the challenges of teaching medical students and/or residents, while maintaining their own medical practice. These workshops are designed to provide some basic teaching skills, to suggest possible ways of handling some of the administrative and management challenges that students and/or residents present to your office, and to allow preceptors as a group to engage in collegial sharing of their experiences in the dual role of teacher/practicing physician. These workshops are available to all active and prospective preceptors and supervisors of the Rural Rotations program.

Dr. Mygdal, a certified and licensed psychologist, is the Director of the Family Practice Faculty Development Center (FDC). FDC assists family physicians in Texas and the south-central states to acquire the academic skills they need to contribute to academic family medicine, whether as full-time teachers and researchers in medical school departments or residency programs, or as preceptors of medical students and residents or in other roles. He holds faculty appointments at the Waco Family Practice Residency Program and the University of Texas Southwestern Medical School.

Dr. Mygdal obtained his bachelor's degree from Stanford University, his master's degree from Middlebury College, and his doctorate in Educational Psychology from Baylor University.



Dr. Kinard is the Educational Training Coordinator of the Family Practice Faculty Development Center. Her role at FDC includes coordinating the educational activities of the center, teaching in the fellowship and other training programs, evaluating center projects, and participating in research activities. She is also involved in training Texas preceptors in the areas of feedback, evaluation and teaching skills.

Dr. Kinard received her doctorate in Educational Psychology from Baylor University in 1993. She had previously received a B. S. in education and a M.S. in speech pathology and audiology from Texas Tech University in Lubbock.

"Recent Advances in Hyperbaric Medicine" is the topic to be presented by **John G. Mills, D.O., M.P.H.**

This presentation will review current indications for the use of hyperbaric oxygen therapy, as well as review clinical cases where hyperbaric oxygen was used in conjunction with other modalities.

Dr. Mills is medical director of Hyperbaric Medicine at Texas College of Osteopathic Medicine and at Osteopathic Medical Center of Texas. Additionally, he serves as chairman of the Department of Public Health and Preventive Medicine at UNTHSC-FW/TCOM.

Dr. Mills received his D.O. degree in 1979 from Michigan State University - College of Osteopathic Medicine, and his M.P.H. degree in Health Planning and Administration at the University of Michigan at Ann Arbor in 1982. He is a fellow of both the American Osteopathic College of Preventive Medicine and the American College of Preventive Medicine.



Harvey G. Micklin, D.O., will present "Psychopharmacology in the Geriatric Patient."

This presentation is tailored to accomplish three objectives: 1) to help physicians become familiar with special considerations in geriatric patients; 2) to help physicians become familiar with pharmacokinetics and pharmacodynamics and the effect of aging on both; and 3) to help physicians gain understanding in the treatment of various mental disorders found in the geriatric population, including anxiety, depression and

cognitive dysfunction.

Dr. Micklin serves as an associate professor and chairman of the Department of Psychiatry and Human Behavior at UNTHSC-FW/TCOM, and as clinical director of the Substance Abuse Institute of North Texas.

Dr. Micklin received his D.O. degree in 1960 from the University of Osteopathic Medicine and Health Sciences - College of Osteopathic Medicine and Surgery, in Des Moines, Iowa. He is a fellow of both the American College of Neuropsychiatrists and the American Board of Medical Psychotherapists. Dr. Micklin is currently president-elect of the American College of Neuropsychiatrists.



"What is Driving Health Care Change in the Market Place" will be discussed by **James D. Shelton**, President of the Central Group, Columbia/HCA.

In his position as president, Mr. Shelton is responsible for the operations of 92 hospitals in Texas and Louisiana, generating over \$1.1 billion annually in earnings before depreciation, interest and taxes.

Mr. Shelton earned a B.A. degree from Louisiana State University, Baton Rouge, and an M.S. degree from the University of Missouri at Columbia.

Mr. Shelton previously served as executive vice president of National Medical Enterprises, where he was responsible for hospital operations in the Central United States; and as regional vice president of National Medical Enterprises, with responsibility for hospital operations in Louisiana and Tennessee.



Mark Bower, C.P.A., will present "Ten Steps to Optimize Revenues in a Medical Practice."

Mr. Bower notes that because physicians are inundated with private and government programs, volumes of regulations, increasing patient loads and a whirlwind of reimbursement changes, physicians often find their revenues decreasing while their workloads are increasing. The key to surviving in the current practice environment is to establish practice management

procedures that ensure every aspect of the physician's practice is being managed correctly.

This presentation will cover the following topics: knowing the rules of the game; how to evaluate collection ratios; receivables management; monitoring contractual write-offs; investigating insurance claims, denials and reduced charges; controlling practice expenses; knowing how many employees are needed; and internal controls and embezzlement. Mr. Bower says that at the end of this presentation, physicians will have tools they can take back to their practice to provide them with crucial practice management information.

Mr. Bower, of Mark T. Bower & Associates, is a national consultant on medical practice management issues with numerous seminars and presentations. He is a former finance manager for a company with assets of \$23 million and sales of \$32 million, and a former tax specialist and audit senior with Coopers & Lybrand of Dallas.

Licensed as a C.P.A. in the State of Texas, Mr. Bower earned his M.B.A. degree from East Texas State University, and his B.B.A. in accounting from Baylor University.



"Difficult Physician-Patient Relationships" will be presented by **Francis X. Blais, D.O.**

This presentation will provide an overview of communication strategies that are useful in working with "difficult" physician-patient interactions, and explore the mechanisms whereby physicians use the label "difficult." Objectives of this workshop are to enable participants to identify the patterns of interaction that cause them the greatest difficulties, and to provide an opportunity to practice specific communication strategies that are useful in working with difficult interactions.

Dr. Blais serves as Professor of Medicine and as acting chairman of the Department of Medical Education at UNTHSC-FW/TCOM.

He received his D.O. degree in 1975 from Philadelphia College of Osteopathic Medicine. Dr. Blais interned at Doctors Hospital, Ohio, where he also completed an internal medicine residency. He served as infectious diseases fellowship at Albany Medical College, New York.

Dr. Blais is a fellow of the American College of Osteopathic Internists. He serves on the Texas HIV Medication Advisory Committee to the Texas Board of Health, and is vice chairman of the AOA AIDS Task

Correction

The April issue of the **TEXAS D.O.** contained information from the Texas Workers' Compensation Commission entitled "Clarification of Use of Forms UB-82/UB-92." The TWCC has issued an advisory notice due to an incorrect date contained in the first paragraph of the above mentioned article.

For your information, the first paragraph should read:

1. Since March 1, 1994, the Texas Workers' Compensation Commission has allowed insurance carriers to accept both the UB-82 and UB-92 billing forms for institutional services. As of June 1, 1995, the commission will no longer allow use of the UB-82 form and will only allow the UB-92 form to be accepted. This change is required in order to simplify the electronic transmission of hospital billing information. Although the UB-92 is an updated version of the UB-82, the difference in the location of required information may cause incorrect data to be transmitted. Dates of service on or after June 1, 1995, must be completed on a UB-92 using the current TWCC-68a instructions.

Hyperbaric Oxygen Therapy



ADVANCED MEDICINE THAT'S 'DIVING' TO NEW HEIGHTS WITH PROVEN RESULTS ON HARD-TO-HEAL WOUNDS



Working closely with Osteopathic Medical Center of Texas' (OMCT) new Hyperbaric Medicine and Wound Treatment Center in Fort Worth, osteopathic physicians nationwide are finding new ways to use a result-oriented treatment protocol to fight a wide variety of diseases and injuries.

Since its inception in

1993, doctors and medical personnel throughout Texas have collaborated with experts in OMCT's wound treatment center to heal illnesses and injuries through concentrated oxygen treatments that boost the body's natural recovery systems. Along the way, researchers are identifying new applications for this proven therapy.

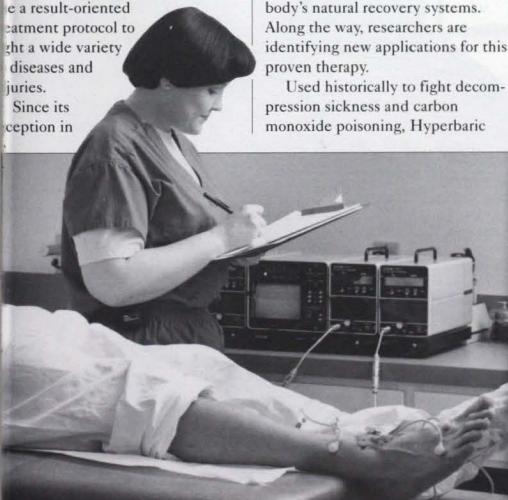
Used historically to fight decompression sickness and carbon monoxide poisoning, Hyperbaric

Oxygen Therapy (HBOT) recently has proven to be surprisingly effective in treating a wide variety of illnesses such as air embolisms, bone infections, open wounds that prove difficult to heal, problem skin grafts, infections in diabetic patients, Brown Recluse Spider bites, gas gangrene, crush injuries, burns, and infections in patients who have previously been treated with high amounts of radiation.

Joint Research and Treatment Programs

OMCT is teaming with the University of North Texas Health Science Center at Fort Worth/Texas College of Osteopathic Medicine to enhance clinical programs and explore different areas of research.

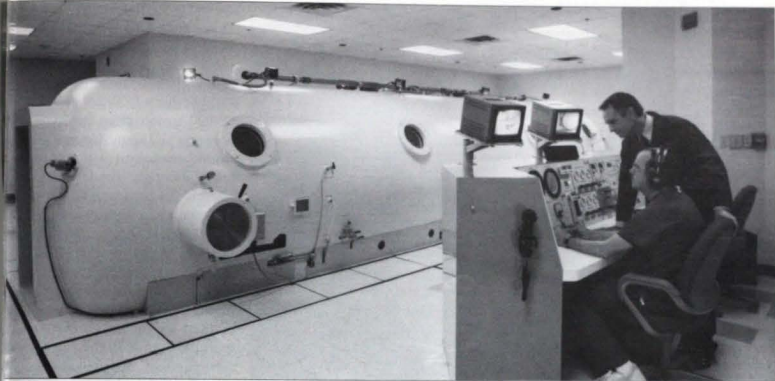
In addition to research projects and treatment services involving a select group of other illnesses and injuries, OMCT plans to collaborate with the health science center to conduct studies on the therapeutic applications of hyperbaric medicine for conditions affecting the brain and other vital organs, including stroke and heart attack.



Staff regularly conducts transcutaneous oxygen evaluations during treatment sessions.



Patients use comfortable hoods and other devices to receive 100 percent oxygen during their treatments in Osteopathic Medical Center of Texas' multiplace hyperbaric chamber.



The center's medical experts monitor patients' activities and welfare inside the multiplace chamber through a central control station.

"This is one of the most exciting parts of our program," says John G. Mills, D.O., associate professor at the health science center and clinical director of hyperbaric medicine at OMCT, "because we have the opportunity to help our patients while we substantially broaden our understanding of how hyperbaric treatment can help the body's normal healing processes.

"We find that it is as much a learning experience for the physicians who refer patients to us as it is for our research teams. Many doctors come to us with a somewhat vague understanding of what is involved in hyperbaric treatment and how it can help their patients. After a brief discussion and a tour of the hyperbaric facility, they quickly realize how much this type of treatment can contribute to their patients' recovery."

Texas D.O.s also are defining the role HBOT plays in their patients' overall health program. They view it as a partnership in which the center often serves as an important part of the patient's total care plan by providing counseling and information as well as treatment.

"Especially in the cases of diabetic and wound patients, we help them understand their situation better and identify ways they can help their body heal itself by managing their lifestyle," says Dr. Mills. "We work hand in hand with physicians to reinforce their advice

Texas D.O.s view it (HBOT) as a partnership in which the center serves as part of a patient's total care plan.

and instructions and strengthen their position in the doctor/patient relationship."

In addition to the assortment of illnesses that the wound management center staff has treated in Texas, HBOT is also being used to fight rare illnesses in other parts of the United States and in the United Kingdom. One of the most exotic of

these is necrotizing fascitis, the Group A streptococcus commonly known as the "flesh-eating bacteria" that received prominent news coverage in the U.S. and England in 1994. In this situation, HBOT is usually applied when the disease has reached advanced stages (necrotizing fascitis), when antibiotics alone might be too little, too late. In a 1990 study, medical researchers found that in matched groups of necrotizing fascitis patients, where one of the groups received HBOT to supplement surgical debridement and antibiotics and one did not, the HBOT group registered 23 percent mortality versus 66 percent mortality in the non-HBOT group.

The center's most popular application of hyperbaric medicine has been in the treatment of wounds, especially wounds that won't heal. By concentrating oxygen systemically inside a patient's body, HBOT promotes the body's natural healing processes.

Morris Larrymore, CHT, OMCT's director of hyperbaric medicine, has an obvious pride in his unit when discussing patients

who have been helped. He is a U.S. Air Force veteran who was involved in hyperbaric treatment for pilots and divers who had experienced decompression sickness ("the bends").

Larrymore cites the example of an elderly, diabetic woman who was admitted to OMCT's emergency room suffering from extensive lesions that had destroyed the flesh on her foot almost to the bone. After conferring with Larrymore's team of specialists, OMCT's emergency room physicians turned to the newly opened hyperbaric treatment facility as an alternative to amputation. A series of HBOT sessions over several weeks brought quick results: The patient's wounds healed, saving the foot.

"It was a special situation for us," Larrymore said. "Until the ER physicians called us in, they saw little alternative to amputation. And, in fact, hyperbaric treatment may have been the only alternative. It was a case where we had the opportunity to educate our own people in a real-life situation and to help a patient who otherwise might have lost a foot due to her illness."

Approved Uses of Hyperbaric Medicine

- Air or gas embolism
- Carbon monoxide poisoning and smoke inhalation
- Carbon monoxide complicated by cyanide poisoning
- Decompression sickness
- Clostridial myonecrosis (gas gangrene)
- Crush injury, compartment syndrome and other acute traumatic ischemias
- Healing of selected problem wounds
- Exceptional blood loss (anemia)
- Necrotizing soft tissue infections (subcutaneous tissue, muscle, fascia)
- Osteomyelitis (refractory)
- Radiation tissue damage (osteoradionecrosis)
- Skin grafts and flaps (compromised)
- Thermal burns

Tarrant County's Only Multiplace Hyperbaric Facility

Although there are approximately 17 hyperbaric facilities in Texas, OMCT's multiplace facility is the only one in Tarrant County. The wound management center features both a monoplace unit, which resembles a large, acrylic-encased torpedo, and a multiplace unit, which looks like a small submarine.

Since its first dive in 1993, the wound management center has provided more than 3,000 treatments to 130 patients. Most of the patients are treated on an outpatient basis, with 70 to 80 percent suffering from diabetes and chronic wounds. Although most patients come from North Texas, Larrymore predicts that by the end of 1995 the Center will be attracting extensive referrals from osteopathic physicians throughout the state.

The monoplace unit allows a patient to be treated individually, while the multiplace chamber will hold as many as 12 patients seated or five lying on bunks. The chamber



4/15/94



5/20/94



8/26/94



11/04/94

Kathy Young is a 37-year-old white female who was referred to the Hyperbaric Medicine Unit with a chief complaint of a non-healing wound to her right heel. She is an insulin-dependent (Type I) diabetic with onset in childhood. She states that the origin of her wound was due to gently tapping the heel of her bare foot on the carpet of her house. She later noticed what looked like a small bruise, and it progressively worsened during the month ensuing her arrival at the unit.

Kathy was found to have neuropathic feet with dry, cracking, hyperkeratotic areas. It was assumed that this served as the portal of entry for infection. The wound was odoriferous and covered with a dark eschar. Initial plain roentgenograms did not disclose significant osteopenia to immediately suspect osteomyelitis. Transcutaneous oxygen measurements indicated

adequate vascularity. Wound care was begun with gentle enzymatic and mechanical debridement. Once the eschar was completely removed, the distal portion of the calcaneus could be seen. Technetium scans intensified the suspicion of osteomyelitis.

The patient was taken to the O.R. for surgical exploration and debridement of any infected bone. Approximately 30 percent of the calcaneus was found to be involved. This was excised, central catheter access was established, antibiotic therapy was initiated on the basis of bone cultures, and hyperbaric therapy (100 percent oxygen at 2.4 ATA for 90 minutes five times weekly) was begun. Under this regimen the patient progressively improved. Granulation tissue filled in the bony defect as well as some portion of the soft tissue deficit. Heel pad tissue regrew over the wound.

Ms. Young is now ambulatory and cares for her two children.

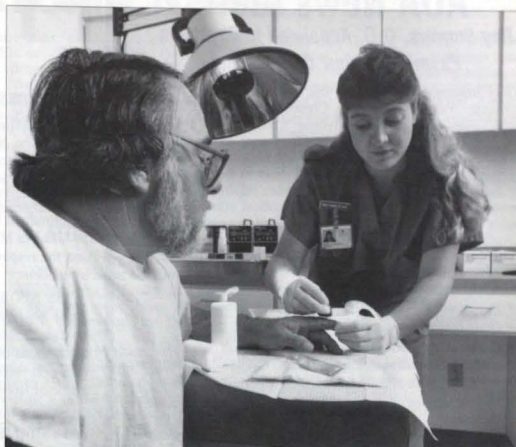
7 feet in diameter, 28 feet long and weighing 30,000 lbs. — houses fold-up seating, bunks, emergency medical and safety equipment, treatment equipment and closed-circuit television so staff can monitor patient activity and/or provide movies and other programs to entertain patients during their sessions.

The treatments are known as "dives" because they replicate the pressurized conditions that a person experiences if he or she were to dive deeply underwater. The single chamber allows the patient to become immersed in a 100 percent oxygen environment for the length of the treatment. In the multiplace chamber, the patient wears a hood mask. As the patient breathes 100 percent pure oxygen, the arterial partial pressure of oxygen (PO₂) approaches 1700 mmHg at a barometric pressure equivalent to a depth of 45 feet of sea water, 2.4 times the normal atmospheric pressure at sea level. The concentrated treatment increases the amount of oxygen in the bloodstream by 10 to 15 times to promote healing, reduce infection and curb tissue loss via improved cellular oxygenation. The additional oxygen dissolved in plasma so that it can reach tissue cells that even a red blood corpuscle could not approach.

Centuries-Old Idea Enters the Modern Age of Medicine

Today's chambers are a sharp contrast to the original models.

Although research-based use of HBOT is relatively new, the first documented use of hyperbaric medical therapy actually predates the official discovery of oxygen. In 1662, Eric Henshaw, a British physician, developed a rudimentary chamber that compressed or extracted air for treating acute and chronic consumptive disorders and other medical cases.



As part of the preparation for hyperbaric treatment, patients and staff conduct a variety of tests to customize the duration and details of the therapy to each patient's condition.

Henshaw's chamber design remained intact for almost the next 200 years. Then about 1834, Junod, a French physician, built a hyperbaric chamber to treat patients with pulmonary illnesses by increasing the atmospheric pressure from two to four times the normal level. By the late 1800s, physicians in several European cities used hyperbaric chambers for a wide variety of applications.

The largest hyperbaric chamber ever built was created by an American physician, Dr. Orville Cunningham, in Cleveland in 1928. The five-story-high structure featured 72 rooms and was used to treat conditions ranging from syphilis and hypertension to diabetes and cancer before being dismantled in 1937.

Ironically, 1937 is the year credited as the beginning of the era of modern hyperbaric medicine because it marked the use of hyperbaric oxygen to counteract decompression sickness.

New Hyperbaric Discoveries Lie Ahead

The consensus at OMCT is that the wound management center has just begun to identify the wide variety of illnesses and medical conditions that can be addressed by hyperbaric treatment.

"As far as I'm concerned," says Dr. Mills, "this is one of the most exciting challenges we face at the Center. We expect to see a wider variety of cases as our relationship with osteopathic physicians continues to expand. Coupled with the research projects we will undertake during the next few years, we should have plenty of opportunities to explore new ways to use hyperbaric programs to promote wellness and recovery. And in doing so, we'll provide a service and facility that will ultimately make it easier for everyone involved in the statewide medical community to serve patients more effectively and efficiently."

AOA News Alert

Ray Stowers, D.O. Appointed to Physician Payment Review Commission

Ray Stowers, D.O., Medford, OK, has been appointed to the Physician Payment Review Commission (P.P.R.C.), an organization charged with advising Congress on a broad spectrum of health issues, including improving the method of paying physicians and controlling costs under the Medicare program, and effectively handling such issues as the direction of the nation's managed care, health system reform, Medicaid, medical malpractice reform, graduate medical education, and quality of care.

Appointments to the commission are made by the Office of Technology Assessment (O.T.A.), with input from twelve members of Congress who make up its board. Selection of commissioners is based upon the following guidelines:

- Physicians, including rural physicians
- Other health professionals
- Individuals skilled in the conduct/interpretation of biomedical, health services, and health economic research
- Representatives of consumers and the elderly
- Representatives of private sector employers (non-healthcare businesses)

Dr. Stowers' expertise in medical education and rural physician manpower issues is recognized both locally and nationally. As evidenced by his background and current activities, Dr. Stowers remains firmly committed to the advancement of rural family medical practice. In addition to operating a solo practice for rural, underserved areas for the past 21 years, he is on the faculty of the Oklahoma State University College of Osteopathic Medicine, Department of Family Practice. Dr. Stowers was appointed by the Governor of Oklahoma to serve on the Board of the Task Force and Rural Planning Committee, where he was responsible for advising the Governor on the state's healthcare manpower needs, and also for convening a state-wide conference on rural health delivery issues. For four years, Dr. Stowers has served as Chairman of the Oklahoma Physician Manpower Training Commission's Governance Committee, and has acted as a controller of all postgraduate funding in Oklahoma, including overseeing reimbursement for physicians. He also served as a U.S. Department of Health and Human Services reviewer on *Rural Interdisciplinary Health Care Grants*. And through the Oklahoma Rural Health Association, Dr. Stowers formed the first federal rural health clinic in the state of Oklahoma.

A recognized expert on physician payment issues, Dr. Stowers has served on the A.M.A.'s Relative Value Update Committee (R.U.C.) since 1992. He is also active in H.C.V.A.s Refinement Panel Process. Since 1994, Dr. Stowers has been the Osteopathic profession's liaison to the American Academy of Family Physicians on issues of reimbursement, certification, legislation and managed care. Dr. Stowers was appointed to the A.O.A.'s Council on Federal Health Programs, the osteopathic profession's federal policy advisory panel. On a local level, he is Past President of the Board of Trustees of the Oklahoma Osteopathic Medical Association.

Dr. Stowers' P.P.R.C. appointment is the result of the concerted efforts of many within the osteopathic profession, including our divisional societies, practice affiliates, A.A.C.O.M. and A.O.H.A. Dr. Stowers is the first osteopathic physician to be appointed to the prestigious committee. ■

FYI

Paperless Operation Is Goal Of NPDB

In an effort to move to an all-electronic query system, the National Practitioner Data Bank reduced the charges for all-electronic queries to \$4 each. Paper queries cost \$6, along with a \$4 processing fee.

To use the electronic query system, the query must be submitted by modem; payment must be authorized by VISA or MasterCard or by electronic funds transfer; and the response from the NPDB must be transmitted by modem.

The NPDB also initiated a change whereby after April 30, 1995, check and money order payments are no longer accepted. All queries must be authorized by credit cards or electronic funds transfer at the time the query is submitted. Additional information can be obtained from the NPDB help line at 800-767-6732.

A Taxing Situation

Out of every eight-hour work day, the average American works two hours and 46 minutes to pay their assorted taxes, according to the Tax Foundation, a Washington research group. The total is nine minutes more than a decade ago, and 47 minutes more than in 1945.

Texans, even without a state income tax, work two hours and 41 minutes a day to pay taxes, which is just five minutes less per day than the national average. The Tax Foundation notes that high sales and property taxes place Texas at number 24 nationwide in the total tax bite.

Remember CHAMPUS Claim Filing Deadlines

Don't forget: CHAMPUS/TRICARE (Standard) claims – whether sent in by the patient or by the provider of care – must be submitted (and postmarked) to reach the appropriate CHAMPUS/TRICARE claims processing contractor within one year of the date the services were received. In the case of inpatient care, the claim must be submitted and postmarked within one year of the date of an inpatient's discharge.

For example, for services received (or provided) on March 22, 1995 – or for a patient discharged from the hospital on that date – the claim must be postmarked no later than March 22, 1996.

To be safe, submit the claim as soon as possible after the episode of care.

ATOMA News

il Districts:

By Peggy Rodgers

Auxiliary News Chairman

me is drawing near for TOMA's Annual Convention and Scientific Seminar, to be held June 15-18 at the Kempinski Hotel in Dallas. While many of us live in the area, we hope others will take some vacation time in order to attend. ATOMA really looks forward to seeing you each year during this time. Please consider this as a time for our family to vacation as well as to unite with friends from across the state. The ATOMA House of Delegates meeting is scheduled for June 15, from 8 a.m. to 12 noon. This would be an excellent time to attend as a member-at-large or as a delegate from your district, in order to become aware of, and involved in the activities of your Auxiliary. We truly need you to attend and help in any way you can to assist ATOMA in its continuing efforts to promote osteopathic medicine. Please take the time to attend the ATOMA House of Delegates meeting. We would love to have you there! If your district has not yet sent in your

delegates, please mail their names to: Elaine Tyler, 3208 Quail Lane, Arlington, TX 76016.

Additionally, the ATOMA Installation Luncheon will be held on Friday, and raffle ticket drawings for door prizes and the cruise to Alaska will take place on Saturday, during President's Night.

Please come and enjoy!

As a reminder, check with TOMA regarding babysitting services, if needed.

ATOMA Fundraiser

By Peggy Rodgers

1995-96 Funds Co-Chairman

ATOMA's major fundraising event of the year will take place during the TOMA convention in Dallas. Our traditional raffle will follow the President's Night dinner, with the grand prize being an all-inclusive cruise for two to Alaska. During the evening, there will be a raffle for various door prizes for attendees, however, you do not have to be present to win the grand prize.

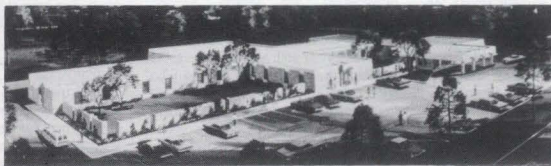
Here's how you can win this great trip as well as help ATOMA end the year with funds to benefit scholarships and

loans to Texas medical students, promote osteopathic medicine and medical research. Help us by selling or purchasing 13 raffle tickets: one for \$10; three for \$25; or 13 for \$100. Anyone may buy a ticket - friends, relatives and associates. By assisting ATOMA in this manner, you are insuring scholarships and medical loans to worthy medical students as well as promoting osteopathic medicine. You will be receiving a supply of these tickets in the mail soon. If you need more, please contact me at 817-429-4140 ASAP.

The Executive Board is requesting that each district, along with individuals, donate a gift for a door prize. Door prizes should have an approximate value of \$50 and up and can consist of gift certificates, crystal, jewelry, cash, tools, etc. The tickets of all individuals who win door prizes will go back into the hopper for a chance at winning the trip to Alaska. Please help by selling tickets and/or sending door prizes.

Thanks for your support! ATOMA really appreciates your help, as do all those physicians and medical students benefitting from your contributions. ■

DOCTORS MEMORIAL HOSPITAL TYLER, TEXAS



Open Staff Osteopathic Hospital in Beautiful East Texas

54 beds 6 bassinets 2 surgeries

Chiefs of Services

Director of Medical Education
Husain Mumtaz, M.D.

General Surgery
L. Roger Knight, M.D.

Internal Medicine
Robert L. Breckenridge, D.O.

Mr. Olie Clem, C.E.O.
Tyler, Texas 75701

Emergency
Steve Rowley, D.O.

OB-Gyn
Loren Goss, M.D.

Radiology
E. B. Rockwell, D.O.

Anesthesiology
Edmund F. Touma, D.O.

Phone: 903-561-3771

1400 West Southwest Loop 323

You Belong to the Largest HMO in Texas - Texas Workers' Compensation Commission

By Richard A. Friedman, D.O., F.A.A.D.E.P., and
Peter N. Rogers, Attorney-at-Law

Medicine is changing. Private businesses, insurance companies and the government control of patients increases each day. Patients can no longer pick their own family physician. Your specialist referrals are based on who is on a list, not who you know is well qualified or who can work at your hospital. Times are changing and we have little control. Five years ago, we didn't need an HMO with reduced reimbursement. Today, membership in HMOs or PPOs are necessary for survival.

You belong to the largest HMO in Texas - Texas Workers' Compensation Commission (TWCC). Presently, every physician licensed in Texas is on the Treating Physician's List of the TWCC. There are rules you have to follow since the new law was passed in 1991. They have been revised and new guidelines are being developed every month concerning how patients are to be treated for different conditions. The rules are strict and if not followed, will result in denial of reimbursement for your services. Once you learn the system, your practice can once again enjoy the patients you are most qualified to treat. All "New Medicines" will have rules and guidelines, whether it is TWCC, an HMO, PPO, Medicare or Medicaid.

This is the first of a series of articles which will hopefully guide you through the maze of the treatment of injured workers in Texas. There are publications and guidelines which are available from the TWCC in Austin, which outline the procedures. The Medical Review Division of TWCC offers instructional courses for the various areas of treatment. They include the basic Medical Treatment Guideline, which describes the medical reports required for the treatment of patients. Certain treatments and therapy past the initial six weeks require preauthorization from the insurance carriers. Reimbursement requires preauthorization before treat-

ment. Insurance carriers are not required to reimburse a physician for treatment without preauthorization. A large percentage of treatment will be denied, so don't take it personally or think you are the "Lone Doctor." Insurance carriers know a certain percent of doctors will "go away." If treatment is denied, TWCC has a hearing process, through the Medical Review Division, which will review the recommended treatment. Emergency treatment does not require preauthorization.

The 1989 Workers' Compensation Act, effective for all injuries as of January 1, 1991, provides for a monetary settlement for an injury covered by workers' compensation through use of an Impairment Rating system. After an injury and treatment, the injured worker will reach a date of Maximum Medical Improvement (MMI). At that time an Impairment Rating is assigned to each region of the body that was injured, using the *AMA Guide to Evaluation of Permanent Impairment*, 3rd edition, Second Printing Feb., 1989. Under the 1989 Act, the patient is entitled to lifetime medical.

Where did the lawyers go and who will represent the patient's rights? Lawyers are out of the settlement process and therefore, do not get a percentage of an injured worker's settlement. Ninety-nine percent of attorneys will not represent a workers' compensation patient. Certain circumstances allow limited legal representation. They include denial of treatment, a benefit review conference, a contested case hearing, and appeals. Generally, legal services are charged for on an hourly basis and the charges are deducted from the workers' compensation checks.

Ombudsmen at each TWCC field office are available to answer a patient's questions and to assist patients with problems and appeals. They are lay people with little or no legal

background. The system was designed to function without an attorney, yet about 80 percent of the insurance carriers have legal representation at Hearings.

TWCC Hearings for denied medical treatment were disorganized and basically non-existent from 1991 to 1993. Presently, disputed hearings take from three months to one year in process. During that time, medical treatment will not be reimbursed and income benefits may be withheld from the injured worker. Mandatory Maximum Medical Improvement occurs at 104 weeks "by law" whether medical care has been denied or not.

TWCC's obligation to provide each injured worker with educational information concerning the new law, their rights and the process for representation by a TWCC ombudsman does not exist. The entire process of "New Law Injuries" is never completely described to a newly injured worker. This puts them at a disadvantage and creates a lot of confusion.

Since 1991, many patients and physicians have stopped participating in the TWCC system because of the lack of knowledge of the new "System" and because of denial of treatment and reimbursement.

Participation in patient care puts a new burden on the physician's office Gatekeepers (as the treating physician are called) require a more active role than past traditional medicine. You are the patient's first line of defense. Preauthorization for treatment requires at least one full time employee who coordinates case management through the process, as recommended by the treating doctors. The insurance carriers have their own people who know all the rules and can stop treatment at any time for almost any reason (usually to save money). Insurance preauthorization may require you to talk to their Doctor Nurses, Rehabilitation counselors and even an adjuster to explain what you propose for treatment, how long, what type, for how many weeks, etc. It can

...tusting. Up until this year, there have
...no guidelines for treatment beyond
...or eight weeks of therapy. This is
...aging as you read this article.

OMA, in conjunction with the
TFA, and the Texas Chiropractic
Association, have been aggressively
developing various guidelines of
treatment which hopefully will act as a
guide for treatment under the "New
Law." The Mental Health Guidelines
have been in effect since March 1, 1995.
The Spinal Treatment Guidelines were
adopted March 9 and will take effect
March 1, 1995. Soon to follow will be
Upper Extremity Treatment Guidelines.
Preauthorization Guidelines are
not to be finalized. Last, but not least,
the new Medical Fee Guideline. The
Medical Fee Guideline work group
met on hold after meeting for several
months without ever being presented the
proposed fees by TWCC Medical
Review. The Medical Advisory
Committee (MAC) of the TWCC is
currently acting as the Fee Guidelines
Committee. Jim W. Czewski, D.O., is
OMA's representative on the MAC. To
date, the MAC has not been presented
with the new proposed fees. At a recent
MAC meeting, TWCC medical fees
were compared to 70 percent of
physician fees. So we know the direction
we are going but we do not have fees
evaluation.

OMA is very active in the present
Guidelines development. The new
Guidelines will be based on the new
AMA Physicians Current Procedural
Terminology (CPT '95). The 1995 CPT
codes, for the first time, have specific
codes for Osteopathic Manipulative
Treatment (98925 to 98929). This
differentiates our OMT from Chiro-
pactic and Physical Therapy manual
medicine.

Future articles will be directed toward
instructing D.O.s on use of Treatment
Guidelines and rules needed to treat
injured workers. Once over the learning
curve, your practice will once again
benefit from treating "New Law"
injured workers. ■

Peter Rogers, Attorney-at-Law - Former
Siding Officer in the Dallas office of the
TWCC; author of "Summaries and Points of
Law" - from decisions of the Appeals Panel of
TWCC.

Richard A. Friedman, D.O., F.A.A.D.E.P. -
Private practice, Medical Director of
Rehabilitation and Work Hardening Clinics,
Dallas and Dallas, Texas.

Texas Workers' Compensation Commission Medical Review Division

Announces an Educational Program

*Health care providers, insurance carriers, and the general public are invited
to attend an educational program on the new Spine Treatment Guideline.*

DATES	CITIES	TIMES
May 25, 1995	Fort Worth, TX	9:00 - 5:00 p.m.
May 26, 1995	Dallas, TX	9:00 - 5:00 p.m.
June 1, 1995	Houston, TX	9:00 - 5:00 p.m.
June 2, 1995	Houston, TX	9:00 - 5:00 p.m.
June 8, 1995	Lubbock, TX	9:00 - 5:00 p.m.
June 9, 1995	El Paso, TX	9:00 - 5:00 p.m.

Confirmation letters will be sent with locations upon receipt
of registration form and check for \$25.00.
Cost covers registration and purchase of the Spine Treatment Guideline.

Make checks payable to: **TWCC #35079**

Registration begins promptly at 8:30 a.m.

Seating is limited

REGISTRATION DEADLINE IS TWO WEEKS PRIOR TO DATE OF EVENT

REGISTRATION FORM

- Complete one form per person • Form may be photocopied
NO FAX, PHONE OR WALK-IN REGISTRATION ACCEPTED

Please Print

Please indicate the date and location of the seminar(s) you wish to attend:

Location _____

Name _____

Organization/Company _____

Address _____

City _____ State _____ Zip Code _____

Phone number () _____

Please check: ☐ Health Care Provider ☐ Insurance Carrier ☐ Employer

☐ Other _____

Send registration form to: The Texas Workers' Compensation Commission,
Medical Review, MS-45
4000 South IH-35, Austin, Texas 78704-7491

In Memoriam

SEABORN E. JONES, D.O.

Dr. Seaborn E. "Gene" Jones, 71, passed away at his Santa Fe, New Mexico home unexpectedly of natural causes on March 22, 1995. Memorial services were held March 27 at the Santa Fe Church of Christ.

Born in Linden, Texas, Dr. Jones was a 1954 graduate of the Kansas City College of Osteopathic Medicine (now known as the University of Health Sciences College of Osteopathic Medicine), Kansas City, Missouri. He completed a surgical residency at Mid-Cities Hospital, Grand Prairie, Texas in 1964. Dr. Jones practiced in Dallas and Missouri before moving to Mineola, Texas in 1965 where he practiced as a surgeon and general practitioner until his retirement in 1991. He moved to Santa Fe in 1993, where he worked part-time as a physician at the State Penitentiary until his death.

Dr. Jones served during World War II as an Air Force Staff Sergeant with the 95th Bomber Group. During his tour of duty, he flew 28 missions into Germany as a ball turret gunner while stationed in England.

Dr. Jones was a long-time member of TOMA, the American Osteopathic Association and the American College of Osteopathic Surgeons. He was an Elder at the Church of Christ in Santa Fe at the time of his death. While practicing in Mineola, he was an Elder at the Broad Street Church of Christ in Mineola for 28 years; served as a Mineola Independent School District School Board Trustee, holding the office of president in 1968-1969; and was the team physician from 1964 to 1970 for the Mineola High School football team. Additionally, Dr. Jones was a member of the Folklore Society, a licensed gunsmith and dealer, and a Civil War buff.

Survivors include his wife, Nona, of Santa Fe; two sons, Dr. Martin W. Jones of Washington, D.C., and Paul E. Jones of San Francisco, California; two daughters, Glenna Carlton of Mansfield, Texas and Dr. Mary F. Jones of Santa Fe; and three grandchildren.

BESSANNE W. ANDERSON

Mrs. Bessanne Anderson of Dallas passed away March 29, 1995. Services were held April 1 at Central Lutheran Church in Dallas, with interment in Restland Memorial Park.

Mrs. Anderson was born in Janesville, Wisconsin. She graduated from high school in 1942 and, in 1943, married Richard W. Anderson, D.O.

Mrs. Anderson had been a member of the Auxiliary to the American Osteopathic Association since 1947. She was an active member of the Auxiliary to the Texas Osteopathic Medical Association since 1968, and was a life member of ATOMA. She organized the Guild at Tri-City Hospital in Dallas in the early 1970s, opening the gift shop there and handling the purchasing.

She was also active in women's activities at Central Lutheran Church, where the Andersons have been members since 1969, serving as treasurer of that group. She volunteered her time and energies to the semi-annual Operation Salvage Sale at the church, which offers direct assistance to relief work in the community and benefits another group to which she devoted countless hours, White Rock Center of Hope. Mrs. Anderson served as chairman of White Rock Center's 1994 Bazaar and also did volunteer work at White Rock YMCA.

Survivors include her husband, Richard W. Anderson, D.O.; son and daughter-in-law, Richard W. Anderson, Jr., and Diane, of Dallas; son Jeffrey L. Anderson of Krum, Texas; grandsons Richard W. Anderson, III, and Steven Anderson; a sister and brother-in-law, Louise and Jerry Fish; brother-in-law George Wellenkotter; and numerous friends.

Memorials may be made to Central Lutheran Church or White Rock Center of Hope, 9353 Garland Road, Dallas, 75218.

STEPHEN A. STERN, D.O.

Dr. Stephen Stern of Euless passed away April 1, 1995. He was 51 years of age. A memorial service was held April 3 at Lucas Funeral Home in Hurst.

Dr. Stern was born in Philadelphia. He received a bachelor of science degree from Temple University in Philadelphia and was a 1968 graduate of the University of Osteopathic Medicine and Health Sciences - College of Osteopathic Medicine and Surgery, Des Moines, Iowa.

Certified in anesthesiology, he was a fellow of the American Osteopathic College of Anesthesiologists, and a fellow of the Midwest Society of Anesthesiologists.

Dr. Stern was a member of TOMA, and was a professor at the University of North Texas Health Science Center at Fort Worth. He was a former chief of staff and trustee at Northeast Community Hospital in Bedford. He was also an Air Force veteran.

Survivors include his wife, Bunny Stern of Euless; two daughters, Linda Renee Stern and Susan Danielle Stern, both of Euless; and his mother, Esther Stern of Philadelphia.

Memorials may be made to Circle of Friends.

ROY LEON RHODES, D.O.

Dr. Roy Leon Rhodes of Alvarado passed away March 25, 1995. He was 51 years of age. Funeral services were held March 27 at Lucas Funeral Home in Hurst.

Dr. Rhodes was born in Broken Bow, Oklahoma. He earned his D.O. degree in 1968 from the University of Health Sciences, College of Osteopathic Medicine, Kansas City, Missouri, and interned at Dallas Osteopathic Hospital. He was certified in family practice.

Dr. Rhodes was on the original staff at Hurst General Hospital, now known as Northeast Community Hospital, Bedford, where he had served as a member of the hospital's Board of Trustees. At the time of his death, Dr. Rhodes was the Director of Medical Education.

Survivors include his wife, Enid Rhodes of Alvarado; one son, Joe Rhodes of Alvarado; two daughters, Cheryl Lenheiser of Fort Worth and Jennifer Rhodes of Denver; parents, Roy and Dencie Rhodes of Fort Worth; one brother, Wayne Rhodes of Alvarado; two sisters, Pat Swanson of Austin and Shirley Newland of Dimmitt; and one grandchild.

Memorials may be made to the Northeast Osteopathic Health Education Foundation, 2101 Bedford Road, Suite E, Bedford, TX 76021.

☆ District Stars ☆

ATOMA District VI Meets

By Mrs. Jerry W. (Joy) Smith
ATOMA District VI

"Is it Night - Or is it Day?" was the subject presented by Jerry J. Pepper, D.O., Senior NASA Flight Surgeon, and guest speaker at the monthly meeting of members and houses of ATOMA District VI. The event took place March 14 at Churrascos Restaurant in Houston, and was hosted by Searle Pharmaceutical.

With over forty members and guests in attendance, all were intrigued with Dr. Pepper's slide presentation and future addressing issues of shift work and sleeping in space, an integrated approach to sleep management. It is reported that absolutely *no one* slept through this presentation, and we are all looking forward to a repeat visit by Dr. Pepper in the near future.

The new Auxiliary officers were introduced by Mrs. Morton Rubin; Mrs. Carl Mitten - Treasurer; Mrs. Larry Pepper - Secretary; Mrs. Ralph Love - Second Vice President; Mrs. D.Y. Campbell - First Vice President; Mrs. Jerry Smith - President Elect; and Mrs. William Badger - President.

The next scheduled meeting for ATOMA District VI is May 21, 1995.

FILE CLAIMS ELECTRONICALLY

- to multiple carriers and benefit programs
- through one clearinghouse
- at no cost to you

For more information on how the Texas Health Information Network™ can simplify your office administration and save you money, call

The Helpline
(214) 766-5480



Administered by Blue Cross and Blue Shield of Texas, Inc.
Endorsed by the Texas Medical Association and the Texas Hospital Association

Osteopathic Medicine Day at the Capitol

On March 27, 1995, sixteen of TOMA's dedicated members came to Austin for TOMA's 1995 Legislative Day. Although the turnout was much lower than had been anticipated, the enthusiasm was very high. The day began with participants enjoying a continental breakfast while receiving legislative tips from Representative Keith Oakley (Terrell) and an update on TOMA's hospital privileges bill from Executive Director Terry Boucher.

After the morning briefing, participants visited both the Senate and House Chambers and listened to the legislators discuss state business. While in the House Gallery, legislative day participants were recognized for it being Osteopathic Medicine Day at the Capitol. Dr. T. Eugene Zachary, TOMA's President, served as Doctor of the Day on March 27 with 3rd year UNTHSC/TCOM student Brent Sanderlin.

After lunch, participants were on their own to visit their Representatives and Senators. They discussed issues with the legislators and/or health aides pertinent to the osteopathic profession and stressed their support of H.B. 585 and S.B. 965, the hospital privileges bill.

Many participants said the experience was very rewarding and educational. TOMA hopes more members become increasingly active in the legislature. TOMA needs your voice to make a difference. Thanks to all those who took the time to participate.



Legislative Day Participants in House Gallery.



Representative Keith Oakley addressing participants.

What's Happening In Washington, D.C.

• **Quick Tax Cut Approval.** The House Ways and Means Committee recently approved a \$188 billion tax cut plan at lightning speed. Even the Republican leaders were shocked by the speed of the Committee.

• **Straight Party Lines.** The tax cut vote in Committee was 21 to 14, completely along party lines. The Democrats opposed the bill on the grounds that they wanted to focus solely on deficit reduction.

• **Child Care Tax Credit.** The tax cut plan would give a \$500 credit for each child under age 18 to taxpayers who have adjusted gross incomes under \$200,000. Shortly after the Committee's approval of the tax cut plan, 102 House Republicans signed a letter requesting that the eligibility cap be reduced to \$95,000, which is close to what President Clinton had proposed weeks earlier. The credit would be effective for tax years beginning in 1996.

• **American Dream Savings Account.** It's a new kind of IRA that would allow taxpayers to make nondeductible contributions of up to \$2,000 per year, and would exempt distributions from income taxes and excise taxes if certain conditions are met. The account would help Americans save for retirement, save for a first home, fund higher educational expenses, and fund medical expenses and long-term care insurance premiums.

• **Social Security Breaks.** The tax cut plan would eliminate the tax increase on social security benefits that was enacted in 1993. It also would increase the amount of income that a social security recipient could earn before losing benefits from \$11,280 per year to \$30,000 per year. These changes would be phased-in by the year 2000.

• **Long-Term Care Bonus.** Under the plan, distributions from regular IRA accounts and retirement plans would not be subject to income taxes if they are used to fund premiums for long-term care insurance.

• **New (Old?) Capital Gains Rules.** The new tax cut plan would reinstate the 50% deduction for capital gains, eliminate the 28% maximum capital gains rate, and reinstate the rule that required \$2 of long-term capital loss to offset \$1 of ordinary income. The new capital gains rules under the tax cut plan look like the old days.

• **Inflation Adjustments Galore.** Under the tax cut plan, the tax basis of capital assets acquired after 1994 would be adjusted for inflation. Also, the unified credit, the annual gift tax exclusion, and the generation-skipping transfer tax exemption would be indexed for inflation after 1998.

• **Home Breaks.** The tax cut bill would entitle a taxpayer to capital loss treatment on any loss realized from the sale of a principal residence. Also, the bill makes it easier for a taxpayer who performs business administrative duties at home to claim home office expense deductions.

• **Bigger First Year Depreciation Deductions.** The tax cut plan would increase the amount that a small business can deduct each year for capital expenditures from \$17,500 to

\$35,000 by the year 1999.

• **Self-Employed Health Care Costs.** In March, the House passed a bill to reinstate permanently the 25% deduction for health care costs paid by self-employed, beginning in 1995. A similar bill has been passed by the Senate.

• **Big Time Deficit Reduction.** On March 16, the House passed a bill to slice \$17.1 billion from the current federal budget and directed that all savings from the bill be applied to reduce the deficit. In a separate action, the House approved a plan to achieve \$100 billion in additional tax savings from substantial welfare reforms, Medicare reductions and reductions in civil service retirement benefits.

NEWLYWEDS NEED PLANNING

Marriage is the most significant commitment that most individuals make during their lifetimes. The legal and planning implications of the marriage are seldom appreciated or fully understood.

If a couple ignores the planning issues, problems can surface in a variety of ways. Disputes may arise over property issues or resolution of debts. Excess taxes may be paid. Anxiety levels may be escalated, which in turn may aggravate other challenges in the marriage. The sad reality that over half of all marriages end in divorce. In some cases poor planning may be a direct or indirect contributing cause of the marriage dissolution. In nearly every divorce, poor planning will make the dissolution process more difficult.

The above information was provided by Dean, Jacobson Financial Services, Fort Worth, Texas.

For Your Information

Physicians should take note of the following information, contained in National Heritage Insurance Company's Special Bulletin, No. 109, dated April, 1995:

Texas Medicaid Reimbursement Methodology (TMRM) Information

As a result of the Governor's Cost Containment Initiative of 1993, an overall increase in the Texas Medicaid Reimbursement Methodology or TMRM will not occur for April 1, 1995. This includes services that are reimbursed at access-based fees or relative value units (RVUs) X conversion factor.

1995 Clinical Laboratory Fee Schedule

The 1995 Clinical Laboratory Fee Schedule implemented by Medicare on January 1, 1995, will be implemented by NHIC for dates of services on and after April 1, 1995.

**Frustrated With
Health Insurance?
Looking for a
New, Stable and
Affordable
Approach?**



**Call the Health
Insurance Experts**

TOMA has endorsed DEAN, JACOBSON Financial Services to handle the frustrations of health insurance for you! While volatility and increasing costs have become the norm for the health-care industry, DEAN, JACOBSON Financial Services has designed a superior group health plan specifically for TOMA members and their employees through CNA Insurance Company. CNA is one of the largest and strongest insurers in the nation. With over \$10 billion of assets and a top A++ rating ("Excellent"), CNA is well-positioned to offer stability, strength and commitment for your future health care needs.

So, if you are looking for a better answer to your health insurance frustrations, call DEAN, JACOBSON Financial Services to join the TOMA program today!

For information on coverages, costs, and enrollment forms contact:

DEAN, JACOBSON FINANCIAL SERVICES

(817)335-3214
P.O. Box 470185
Fort Worth, TX 76147

(800)321-0246
(817)429-0460
Dallas/Fort Worth Metro

Self's Tips & Tidings

Don Self & Associates

TETANUS INJECTIONS - MEDICARE

Since Medicare deleted HCPCS code J3180 (Tetanus Injection) this year, you should use the CPT code 90703 for all tetanus injections. As we discover other deletions, additions and changes that should affect you, we will do our best to get the word out to you.

COLLECTIONS AT TIME OF SERVICE

While it may seem strange to some, many practices are still not collecting from the patient, at the time of service. Your customers (patients) expect to pay at the time they receive goods, products or services, as exemplified every time they go to the grocery store, pharmacy, service station, clothing store, Walmart, etc. ... If that is the case, why not when they go to the doctor? You know without a doubt that the majority of Dentists collect at the time of service. I'm sure if I checked your reception area, I would see a sign such as: "Payment expected when services rendered." But how often do we promote that idea? One of my favorite practices, when I am on the road, is to sit in the reception area and watch different collection techniques. Some of the most pitiful statements that I've heard from front office personnel are:

- Do you want us to bill you?
- How much do you want to pay today?
- Would you like to pay on this today?
- Don't worry about it - we'll bill you!
- We don't take credit cards.
- The computer is down - we'll bill you.
- We give discounts for cash.

Just try telling the checker at Krogers to bill you the next time you go in for groceries.

Or go ahead and eat at your favorite restaurant and when presented with the check, tell them that you wrote your last check out of your checkbook and you don't carry credit cards. I'll bet they'll be just as understanding as your receptionist...NOT. Sometimes I wonder if front office personnel would be so forgiving of patients forgetting to bring cash, if they realized the money they are collecting is their own? In a way...it is!!!

Many times, it is not the fault of the front office staff or office manager. Quite often, it is the physician who should be credited for these attitudes. When the staff hears the doctor say, "Don't worry about your bill, Mrs. Smith - we'll bill you," the feeling that collections aren't important is transferred to the staff. A wise physician is one that leaves the financial arrangements with the patient to the employee that is trained in the area and a little bit detached from the emotional physician-patient relationship. The office manager has probably been trained in this area and can work out a much better payment arrangement with the patient than the physician usually can. After all - it's their job to do so! That's why they get the big bucks and glamorous benefits. My suggestion for EVERY...EVERY physician has always been: "ANYTHING YOU WORK OUT WITH (OFFICE MANAGER'S NAME) WILL BE FINE WITH ME." By consistently and unfaithfully using this phrase, the physician has an easy, yet effective, exit from financial discussions with the patient. Is this the chicken way out? Not at all! It is the wise person that utilizes their assets to their utmost capacity. This also will allow the office manager to handle the snooty and rude patient that walks up with their nose in the air and proclaims they don't have to be bothered with paying their bill as the doctor said not to worry about it. Doctors, using the phrase shown above works better on your office manager than Zantac, Tagamet, Pepcid and Carafate combined.

How about the office that discounts the fee for everyone that is

on the doctor's spouse's bowling team, or goes to church with the doctor, or belongs to the same golf club as the doctor, or has a neighbor that plays little league ball with the doctor's step brother's mechanic? Where does it end? How did it begin? Giving discounts can be a bad idea for a couple of reasons:

1. The inflation factor for 1994 was slightly over 6% for the average business. It was 9% for physician practices. If you are seeing Medicare patients, Medicaid patients, PPO patients and giving discounts, you are not keeping up with inflation.

2. When you give a discount, you may be breaking civil law if insurance carriers are involved. When you file an insurance claim, the amount you file the claim for denotes the amount you reasonably expect to receive. Almost all insurance policies require the policy holder to have some kind of vested financial interest in the contract. If you are showing the full fee to the carrier and through giving a discount, waiving the patient's portion, you may be successfully sued by the carrier for fraud. Most policies pay 80% of the fee (court definition: what you reasonably expect to receive for said services). If the carrier realized your fee was less (due to the discount), they would pay 80% of the discounted fee so consequently...fraud.

If you wish to discount a patient's bill, the best (and safest) way to do so is to just not charge for a service or just down-code it, visit.

CAPITATION WORKSHOPS - DAL/HOU

McVey & Assoc. hosted two half-day workshops on CAPITATION, (negotiating profitable contracts, calculating cost per patient encounter, dealing with MSOs, getting paid time etc.). The speaker was Fred Chafin and the workshops were in Dallas (Apr. 26) and Houston (Apr. 28).

WHERE TO FILE FOR SUPPLIES

It seems to be getting more and more confusing in the area of billing for supplies, trays, splints, etc.... Medicare Newsletter #135 (3/7/95) outlines the directions on pages 19 - 23. Briefly, have listed a few that may affect you:

A4454	Elastic Bandage	Not Covered
A4490	Surgical Stocking	Not Covered
A4550	Surgical Tray	Blue Cross Texa
A4560 - A4558	Pessary, Sling, Splint	
	Rib Belt	DMERC
A4580 - A4590	Casting Supplies	Blue Cross Texa
E0100 - E0749	DME	DMERC

As we've stated before, we do not recommend you get into supply business. For the majority of practices, it is not profitable. If the patient needs the supply, we generally suggest you write prescription and allow the patient to get it filled at your local medical supply outlet.

GLOBAL PERIOD CHANGES - MEDICARE

Also reported in the same newsletter is a list of procedure codes that have had their Global Fee Period changed from XX to (none to one day). The following codes now have a one day Global Period:

95115	95149
95117	95165
95144	95170
95145	95180
95146	95199
95147	95880
95148	95881

tain, this means that if you perform one of these services, and wish to charge for an E & M service on the same day, you had to use modifier 25 to denote the E & M service was separately billable and use a different ICD9 reference code in box 24E.

EKG & CHEST X-RAY CRACKDOWNS

While most hospitals require a pre-operative physical to obtain an EKG, many physicians are now discovering that Medicare doesn't necessarily agree. HCFA has been requiring, for at least six years now, "medical necessity" to be the major factor in coverage determination. If there is not a cardiac diagnosis (ICD9 code or ICD9 codes relating to symptoms that would warrant an EKG, plan on having the EKG denied. Some symptoms that would probably qualify for EKG coverage are: shortness of breath (786.09), fatigue (780.7), and dizziness (780.4), as well as many others. If one of the symptoms are not present and the EKG or Chest X-ray cannot be shown to be "medically necessary" with a diagnosis, then you had better have the patient sign a "medical unnecessary" form in advance of the service. If not, don't plan on being paid.

PHYSICIAN MEDICINE PAY MAY BE COMING

HCFA has just taken a first step towards paying for medicine services. This spring, HCFA will be issuing "incentives" to certain physicians in a pilot project, allowing them to bill Medicare for "teleconferencing." The project will gauge the effectiveness of having primary care physicians in rural communities to get counseling from physicians at larger hospitals or teaching facilities by linking the sites through video and modems. If all goes as expected, we can probably expect to see Medicare paying for these services nationally within the next few years.

MEDICAID - ONE DATE PER LINE ITEM

Not surprisingly, we are still receiving copies of Medicaid R & R reports where the physician staff tried to use the to/from dates of service to denote more than one date. While this practice is acceptable by Medicare and private carriers, Medicaid does not accept them. Box 24, on the standard HCFA 1500 claim form (90 edition) allows for six line items on a claim. As an example, if you are filing a Medicaid claim for hospital visits on consecutive days (March 6th, 7th & 8th), you may not consolidate them as one line item and use 03/06/95 to 03/08/95 on one line. You must list them separately on Medicaid claims as separate line items.

VACCINATIONS & ANTIGEN BILLING

While most Allergists have this area fine tuned, many primary care offices are confused, since the January 1 change took effect. Be sure to specify the number of doses you are billing, when filing for antigen services. Payment will be made by multiplying the per dose allowance by the number of doses you bill. As an example, if you have prepared a multi-dose vial of antigens and inject one dose, you bill for seven doses of antigen and one injection service. In this example, you would bill for code 95115 (single injection) and seven charges of code 95165. Using Medicare allowed amounts for Smith County (as an example), you would have the following:

95115	Injection - single	\$12.14
95165	\$5.42 x 7 doses	\$37.94
99213	Office Visit	\$32.22

You'll notice that we included an office visit, as on many

claims we see go through our electronic claim filing service, we see office visits missing.

If the patient returns, with their vial, for another injection, you would go ahead and charge for 95115 on that date. In addition, if you recorded the vitals, complaint, symptoms, observations and noted the history was reviewed, you could also charge for code 99211 or 99212, depending on whether or not the physician was present in the room with the patient.

BEWARE OF STARK II

As we reported earlier, the STARK II law went into effect on January 1 of this year. Fortunately, Medicare is not pursuing the enforcement of the law, as there are still questions that have to be answered by HCFA, HHS and Congress, concerning the intent of the law. Regardless, a representative at HCFA reported to me today that "someday, physicians may be held responsible for the law, retroactive to January 1, even though we're not sure of exactly what the law entails." Does this sound like typical governmental bureaucratic nonsense to you? Even though HCFA doesn't understand what it takes to be in violation of the law, they may decide later to hold you to it retroactively! Wow!

From everything we have read about STARK II (Section 1877 of the Social Security Act), it appears that physicians may have NO financial interest (including immediate family member financial interest) in any designated health services (dhs) referrals for any Medicare OR Medicaid claims. The dhs list includes:

- Clinical lab services
- Physical therapy services
- Occupational therapy services
- Radiology services
- Radiation therapy services
- DME equipment and supplies
- Parenteral & enteral nutrient supplies
- Home health services
- Out-patient prescription drugs
- In-patient and out-patient hospital services

This does not include the in-office lab, OMT, physical therapy, X-rays or other services that you provide under your own billing number. In other words, if you order a lab test, run the test in your office and bill Medicare or Medicaid for the test, it does not involve Stark. However, if you order a lab test on a Medicare or Medicaid patient from a lab in your town that you, your spouse, your parents, your siblings or your children have ANY financial relationship with (employee of that lab, 5% owner of the lab or holding company of the lab, receives any checks from the lab, etc.), then you are probably in danger of being in violation of Stark II. If you have an ownership interest in any of the above listed dhs areas, we recommend you either get hold of an attorney and have them study Stark II or consider liquidating your interest as soon as possible. Since HCFA is unclear and I am not an attorney, I believe you should be extremely wary of this area. This is one area where it may be extremely prudent to stay on the cautious side.

THROW OUT OLD ICD9 BOOKS

One major problem with many claims is the use of outdated, deleted or insufficient ICD9 codes. We recommend you update your ICD9 books and not use any that are prior to 1994. ■

News From the University of North Texas Health Science Center at Fort Worth

Medical Students Make Cultural, Medical Treks During Spring Break

This year's Spring Break took TCOM students to South Texas and south of the border. Two groups made the trips for different reasons, one to see how much they're needed in the future and the other to care for needs right now.

Nine students of TCOM's Rural Health Organization went to the lower Rio Grande Valley and then into Mexico to see how people live in the poorest communities of Texas and its neighboring country. They met with physicians, visited several cities and talked to people about their living conditions and work life.

Making the trip were Anjali Varde, Cynthia Ball, Stephen Seale, Ramana Surya, David Davila, Ana Shah, Lenore DePachter, Leonor Osorio and Sara White. The students learned how poverty and differences in cultures affect medical care.

Their trip was organized by the health science center's Department of Urban and Rural Health. It was financed by the South Texas Area Health Education Center (AHEC) and coordinated by Frank Vasquez of the Rio Grande Valley AHEC.

The Christian Medical and Dental Society also visited Mexico, but went to give medical care to the poor. Their mission trip to Reynosa was packed with long days of exams, with more than 1,200 patient visits in less than one week.

Students making the mission trip were Matt Glick, Dan Shuman, Jill Simpson, Joseph Saucedo, Brian Way, Joel Dow, Chimene Willis, Jeff Morrison, Jeff Taylor, Grant Tarbox, Tony Arnold, Heather Horne, Vicki DeBolt, Robert Denyer, Pam George and Mike Bailey.

Also, Carla Dick, Jody Griswald, Tom Dayberry, Don Tribick, Lori Miller, Krista Edwards, Mike Malone, Mike Capuano, Lisa Gorman, Chris Perkins, Paresh Patel and Ray Rodriguez.

Assisting the students were Craig Whiting, D.O., family medicine, Charlie Gibson, D.O., Rob Wagonek, D.O., and Michael Armstrong, D.O., all TCOM alumni, and Physician's Assistant Laura Brown. The TCOM Alumni Association provided some funds for the trip, with the rest of the expenses covered by fund raisers the CMDS members held throughout the year. Medical supplies were provided by several pharmaceutical companies.

Students from both trips say this Spring Break gave them more than a look at treating the poor in Mexico or South Texas.

"It reminded me of why I first wanted to be a doctor," Shuman said.

"It helped me realize why we do what we do, and how important what I learn in medical school will be to the care I'll provide as a physician," Dow said.

TCOM Student Serves on National Board for Health Care Reform

Barbara Hair, TCOM Class of '96, traveled to Chicago in March to participate in the newly formed "Study of the Federation," a consortium of physicians and students working to organize medicine to meet the future needs and concerns of the profession.

Hair is one of only four students and one of only two osteopathic physicians in the consortium. The Study was initiated and is being conducted by the American Medical Association.

The Study includes a consortium of more than 200 members nominated and supported by their medical societies, and a smaller 28-member Project Team. The Project Team focuses on strategy development and the Consortium focuses on direction-setting and strategy evaluation.

"We are looking at redefining the relationships in organized medicine in order to enable the medical profession to speak with one voice on critical issues. We also expect to create more effective ways to accomplish work on behalf of the profession," said Hair. The group also hopes to identify ways to eliminate or minimize duplication of services between medical societies as well as to focus each element of organized medicine on what it does best.

"We want to see this group become the umbrella where we all come together. We're looking at how we can work better together, and what our vehicles are for discussing issues that affect us all."

In the March meeting, the consortium reached consensus on four major areas that they hope will guide them in planning the two-year study. They are:

1. Physicians will need greater public trust and credibility and an improved image as patient advocates.
2. Physicians must be involved in defining quality care, practice parameters and standards of care.
3. Physicians will need effective representation focused on the future, not protecting the past.
4. Physicians need better preparation for the changing practice environment.

The Federation meets again in October to begin planning specific levels of action

to address these concerns.

Hair said that the Federation was formed to encourage the medical profession to take control over the issues that affect them in the changing health care environment. This could include reinventing the way medical societies operate to be more interactive, a unified effort to affect public policy concerning health care, and revising practice parameters and outcomes research.

Hair represented the student chapter of the Texas Medical Association on the Study. She is active with the TMA on the Council for Scientific Affairs. She is also a member of the Student Osteopathic Medical Association, the Student Association of Osteopathic Medicine, and the Society for the Advancement of Osteopathic Medicine.

Graduate Student's Research Named Winning Project at Research Appreciation Day

When Rustin Reeves was teaching biology at Waxahachie High School three years ago, he could see himself in college classroom, instructing future young scientists.

As the winner of the poster contest at the Health Science Center's third annual Research Appreciation Day on March 2, Reeves is well on his way to seeing the dream become a reality.

His award-winning project was called "Mechanism and Regulation of the Osmoregulatory Efflux Pathway of Myo Inositol (MI) in Cultured Bovine Lens Epithelial Cells."

The study involves the depletion of myo-inositol — a sugar alcohol formed by the body from food — and its role in the formation of cataracts.

Reeves is a third-year Ph.D. student in the Graduate School of Biomedical Sciences and does his research with the North Texas Eye Research Institute, one of the school's Centers of Excellence.

"There does appear to be a link between the loss of myo-inositol and cataract formation," he said. "We believe we can prove that in the next few years."

Reeves grew up in Ennis and taught high school in Waxahachie from 1987-1992. He now lives in Plano with his wife Sandy, and their children, Kristin, 7, and Kyle, 2. He plans to teach college-level biology after he earns his doctorate.

Other winners at Research Appreciation Day were graduate students Kristi Bryant, second place, and Marianna Jur third place.

Public Health Representatives Visit Campus

Armen Rocca, M.D., a pediatrician with the Brownsville Community Health Center, will visit the health science center on March 9 to discuss studies resulting from Brownsville's discovery in 1991 of an alarmingly high incidence of anencephaly, a birth defect in which the brain of the fetus fails to develop.

An investigation by the national Centers for Disease Control and Prevention followed, bringing national attention to the Texas border town. That study found that Brownsville and surrounding Cameron County had five times the national average of anencephaly cases.

Rocca initiated her own study to see if environmental factors in Brownsville, such as water pollution and soil contamination from toxic chemicals, might have led to the birth defects. Public support of her study led to involvement by the Environmental Protection Agency.

Rocca will be joined by Paula Gomez, executive director of the Brownsville Health Center, who will discuss some of the social issues involved in the study and the community support for it.

The Grand Rounds lecture is being cosponsored by the Department of Family Medicine and is sponsored by the March of Dimes.

In the News

Sam Buchanan, D.O., chairman of the Department of Surgery and TCOM Class of '75, has received a three-year appointment as cancer liaison physician with the Commission on Cancer of the American College of Surgeons. Buchanan will serve as liaison for the Hospital Cancer Program at Osteopathic Medical Center of Texas.

Sam Coleridge, D.O., chairman of the Department of Family Medicine, and T. Eugene Zachary, D.O., associate professor of the Department of Family Medicine, volunteered to serve as "Physicians of the Day" for the Texas Legislature March. Coleridge represented the Texas Academy of Family Physicians as physician of the day on March 20. Zachary represented the Texas Osteopathic Medical Association on March 27. As physician of the day, Coleridge and Zachary ran the Capitol first aid station and were available to treat emergencies.

Also, at the March 18 annual convention of the American College of Osteopathic Family Physicians in Dallas, Zachary was re-elected speaker of the Congress of Delegates.

John Podgore, D.O., acting chairman of the Department of Pediatrics, was recently certified by the American Academy of Pediatrics Board of Infectious Diseases. He took his subspecialty examination in November, joining the first group of pediatricians to be board certified in pediatric infectious diseases.



A lesson for all ages. Members of Morningside Middle School's Young Doctors Club visited the health science center March 28 to have fun while learning a serious lesson about life. With rubber gloves to limit dexterity, foggy glasses to impair vision, cotton in their ears for hearing loss and a noseclip to limit breathing, they discovered some of the health problems that the elderly face. The students were guests of TCOM's Medical Student Geriatric Medicine Society. The simulation workshop was led by OMCT's Katie Sherger, R.N.; and group discussions about aging were led by osteopathic physicians Virginia and Noel Ellis. Morningside is one of the health science center's Adopt-A-School partnerships with the Fort Worth ISD.

Pediatric Use of Adult Medications

Food and Drug Administration Commissioner David Kessler, M.D., has announced a change in labeling that will permit drug manufacturers to add appropriate pediatric dosage information to adult medication labels. The change was implemented due to the fact that many adult medications are used in children even without the proper pediatric dosage information.

Ordinarily, pharmaceutical manufacturers do not seek FDA's approval for adult medication use for children due to two factors: testing is extremely expensive and complicated problems can arise such as risk of liability if a child is harmed.

In acknowledgement of this problem, Dr. Kessler will now permit drug manufacturers to examine the data they already have on file regarding use of their drugs in children, and to submit that data to the FDA so that appropriate pediatric dosage can be added to the label. The new regulation will affect prescription as well as over-the-counter drugs.

The pediatric use statement must be based on clinical data and other use information, however, manufacturers will not have to run expensive new clinical tests on children in order to add the information to their current label. In the future, most new drugs tested in clinical trials will have a pediatric component so that pediatric dosages will be known when the drug initially hits the market. ■

Bike Helmet Bill Passes Senate

The Texas Senate, after vigorous debate, voted 20-11 to approve legislation that would require children 17 and under to wear a helmet when they ride bicycles. The bill by Senator Judith Zaffirini, D-Laredo, does not contain penalties, unlike the House bill by Representative Bill Carter, R-Fort Worth, which would fine parents up to \$50 if their children were caught riding without a helmet. The legislation now moves to the House. ■

Texas Society of the ACOFP Update

By Joseph Montgomery-Davis, D.O., Texas Society of the ACOFP Editor

Recently all Texans set their clocks forward; all Texas clocks "sprang forward." The osteopathic profession in Texas also took a major leap forward when TOMA's offer was accepted, pending approval of inspection and financing, for the purchase of a piece of property at 1415 Lavaca in Austin, Texas. If all goes as planned, the picture of the Texas Capitol on the cover of the March, 1995 issue of the **TEXAS D.O.** is what you will see from the back door of this new TOMA property, which is located within one block walking-distance of the Capitol building. You can't get much closer than that, folks!

The Texas Society of the ACOFP would like to thank the following osteopathic physicians for their participation in the "Physician of the Day" program at the Texas Capitol during "Osteopathic Awareness Week" - March 27 - 31, 1995: Dr. T. Eugene Zachary, TOMA President; Dr. Ben Young, Texas Society of the ACOFP President; Dr. Richard Lande of Houston; and Dr. Charlotte Fowler of Jasper.

We would also like to thank all our members who attended the ACOFP Annual Convention at the Loews Anatole Hotel in Dallas, and contributed to the successful installation of its new President Dr. Robert G. Maul of Lubbock. The Texas Society of the ACOFP was the host state chapter for this gala event and extended some good ole' Texas hospitality to all of the participants.

As part of the festivities during the ACOFP Presidential Banquet in honor of Dr. Maul on March 18, several awards were presented. I was the recipient of a "Special Recognition Award" from the ACOFP. The presenter was Dr. Mary Burnett. It was a very special honor for me, made even more special, by receiving this award from someone who I consider to be the "First Lady of the Osteopathic Profession." I wish to thank the ACOFP for this special award.

The political scene in Austin is starting to heat up! The 74th Legislative Session has gone past its half-way point. Politics is the art of compromise, and the art of the possible. Very seldom do you get the whole loaf of bread. If you get more than half of the loaf, you can declare political victory. In a new spirit of reconciliation, the TOMA legislation currently pending in the Texas Legislature is now officially named the "Hospital Staff Privileges Bill."

At the time of drafting this article, S.B. 965, by Senator Carlos Truan, has passed the Texas Senate without one negative vote and is in the Public Health Committee of the Texas House of Representatives. H.B. 585, by Representative Jack Harris, is scheduled for a vote by the full house on April 12. What this means is that by the time you receive this issue of the **TEXAS D.O.**, the "Hospital Staff Privileges Bill" may have been signed into law by Governor George W. Bush.

For your scrutiny, the text of the agreed-upon bill is published below.

S.B. 965

By Senator Carlos Truan

A Bill To Be Entitled "Hospital Staff Privileges Bill"

AN ACT

relating to hospital staff privileges for physicians, podiatrists, and dentists.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. SECTION 241.101, HEALTH AND SAFETY CODE, IS AMENDED BY AMENDING SUBSECTION (C) AND ADDING SUBSECTIONS (C)-(i) to read as follows:

(c) The process for considering applications for medical staff membership and privileges must afford each physician, podiatrist, and dentist (applicant) procedural due process.

(e) A hospital's bylaw requirements for staff privileges may require a physician, podiatrist, or dentist to document it person's current clinical competency and professional training and experience in the medical procedures for which privileges are requested.

(f) In granting or refusing medical staff membership or privileges, a hospital may not differentiate on the basis of it academic medical degree held by a physician.

(g) Graduate medical education may be used as a standard or qualification for medical staff membership or privileges if a physician only if equal recognition is given to training programs accredited by the Accreditation Council on Graduate Medical Education and by the American Osteopathic Association.

(h) Board certification may be used as a standard qualification for medical staff membership or privileges for physician only if equal recognition is given to certification programs approved by the American Board of Medical Specialties and the Bureau of Osteopathic Specialists.

(i) A hospital's credentials committee shall act expeditiously and without unnecessary delay when a licensed physician, podiatrist, or dentist submits a completed application for medical staff membership or privileges. The hospital's credentials committee shall take action on the completed application not later than the 90th day after the date on which the application is received. The governing body of the hospital shall take final action on the application for medical staff membership or privileges not later than the 60th day after the date on which the recommendation of the credentials committee is received. The hospital must notify the applicant in writing of the hospital's final action, including a reason for denial or restriction of privileges, not later than the 20th day after the date on which final action is taken.

I would like to remind the Texas Society of the ACOFP membership of the breakfast/meeting scheduled for Friday June 16, from 6:50 a.m. to 7:50 a.m. This will be held during TOMA's 96th Annual Convention and Scientific Seminar at the Grand Kempinski Hotel in Dallas. The breakfast is free-of-charge to Texas Society of the ACOFP members who are current with their dues. If any member is uncertain whether or not they are a member in "good standing," please phone Executive Director, Dawn Keilers, at 800-825-8967. We should be happy to let you know your current status. Remember, membership in the Texas Society of the ACOFP is separate from membership in the ACOFP.

In closing, a significant historical fact came to light recently while reading a pharmaceutical calendar. The second of March was the anniversary of the 1st Osteopathy School Graduate (in Kirksville, Missouri) in 1894. All Texans recognize it the same day as the anniversary of Texas Independence Day. Texas D.O.s, we have a double reason to celebrate every year of March. March 2nd. will always be remembered as a special day by Texas osteopathic physicians.

Congratulations

TOMA would like to take this opportunity to congratulate Robert G. Maul, D.O., of Lubbock, who was inducted as President of the American College of Osteopathic Family Physicians on March 18, 1995, during the ACOFP's convention, held at the Loews-Anatole Hotel in Dallas.

Congratulations are also in order for Joseph Montgomery-Davis, D.O., of Raymondville, who was honored with a special recognition award from the ACOFP, for his years of loyal service to the osteopathic profession on both the state and national levels.

CDC Cites Dramatic Increase In Fetal Alcohol Syndrome

According to the Centers for Disease Control and Prevention, the rate of fetal alcohol syndrome has jumped from one per 10,000 births in 1979 to 6.7 per 10,000 births in 1993. Among the 9.4 million births during the 15-year period, a total of 2,032 cases of fetal alcohol syndrome were reported.

Researchers aren't certain whether the increase is a result of improved diagnosis by physicians or whether more pregnant women are drinking.

Despite increasing awareness that abstaining from liquor prevents the syndrome, the CDC said that approximately one-fifth of all women continue to drink even upon learning that they are pregnant.

One of the Best Bargains Around

Another advantage of TOMA membership can be found in the classified ad section of the **TEXAS D.O.** For only \$10 per month, TOMA members can advertise for colleagues for their practices, look for a position, buy or sell equipment or practices, and so on.

If you aren't a TOMA member, you'll still find great prices for classified advertising. At only \$1 per word (\$25 minimum), your ad will reach 3,100 sources, which includes over 2,500 osteopathic physicians and their spouses, controlled distribution to hospitals, students attending osteopathic colleges, school libraries, government officials, major pharmaceutical companies and 200 interns and residents.

Call TOMA at 800-444-8662 to place an ad and take advantage of one of the best bargains around.



(L - R) Rodney M. Wiseman, D.O., TACOFF Treasurer; Capt. Benjamin Maul, D.O., FACOFF, TACOFF President.



(L - R) Howard Neer, D.O., FACOFF President-Elect of the AOA; Robert Maul, D.O., ACOFP President.

(L - R) John D. Angeloni, D.O., FACGP, ACOFP Immediate Past-President.



(L - R) Royce K. Keilers, D.O., FACGP, Drs. Young and Maul.

News from Osteopathic Health System of Texas

OMCT Passes JCAHO Survey With Flying Colors

"A flagship hospital." "Top five percent." "I enjoyed being at a place like this." These were the comments from the Joint Commission on Accreditation for Healthcare Organization (JCAHO) surveyors who spent March 14 to 17 inspecting Osteopathic Medical Center of Texas.

"What we have seen here for the past four days has to be one of the most successful JCAHO surveys ever," said Ron Stephen, senior vice president of Operations for OMCT. "The bottom line is this is as good as it gets."

While the actual results from the survey will not be available for two to three months, all indications are extremely favorable for a 95 to 96 rating. There were two areas that may result in Type I deficiencies, one was a minor issue in a medical record and the other involved increased air flow in isolation rooms which Mr. Stephen predicts will be remedied in 30 to 45 days.

OMCT underwent a mock survey just six weeks before the actual survey which helped pinpoint areas that were in need of additional documentation or other improvements. Bryce Beyer, D.O., senior vice president for Medical Affairs, promised the crowd gathered that next time, the mock survey will not be scheduled so close to the actual survey. "We recognize all of the hours and all of the midnight oil that has been burned in the past six weeks. Everyone did a great job."

Two departments at OMCT, Plant Maintenance and the Pharmacy, did so well they are receiving commendable performance recognition from the JCAHO, and will be listed and used as references by the Joint Commission for the rest of the country.

The Aledo, Mansfield and Burleson Rural Health Clinics were also part of the JCAHO survey. The clinics which fall under OMCT and the continuum of patient care, were surveyed on March 15 regarding their X-ray, laboratory and medical records.

On March 23 and 24, as OMCT employees relaxed from the previous week's visit by JCAHO, Home Health Care was undergoing their portion of the survey.

"The Home Health survey was separate from the OMCT survey because we are evaluated with an entirely different set of requirements," said Mary Lou Chappell, RN, director of Home Health Care. "But, even though the survey was separate, the outcome of the survey is reflected in the hospital's score and could negatively affect the entire organization. Talk about pressure!"

The surveyor accompanied staff on home visits and interviewed the patients and their families about the care given by Home Health. The surveyor even interviewed more than half of the 37-member staff. Mary Lou credited her staff with an exemplary performance saying, "the department did very well, and were cited with no Type I recommendations and only three minor, supplemental recommendations."

The department was one of the first Home Health Agencies to be evaluated under the new guidelines set for 1995.

The JCAHO accreditation is a voluntary, three-year national accreditation which ensures quality patient care delivery. OMCT's first JCAHO survey was in 1992.

Healthy Expansion at OMCT Continues

The Osteopathic Family Medicine and Rural Health Clinics are well-rooted in their communities, bringing residents the comfort and reassurance that medical care is close by whenever needed. Each of the nine clinics is an extension of Osteopathic Health System of Texas and is part of a network of clinics strategically located throughout Fort Worth and the neighboring areas.

The OHST clinic network, which began in December, 1992 is an appropriate setting for osteopathic physicians. Historically, D.O.s have provided a strong primary care base in the health care field, and many D.O.s have set up practice in rural and underserved areas, many times providing the first and only physician in the area.

"OHST is on the forefront of health care as we take medical care and our prevention and education programs out to the community through our clinics," said Yolanda Cervantes, vice president of Community Health Care for OHST. "We are committed to identifying and addressing the health care needs of each community, and we want the services our clinics and physicians provide to be an intricate part of the fabric of each community."

The nine Osteopathic Family Medicine and Rural Health Clinics are:

Aledo
Larry Burrows, D.O.
FM # 1187
Aledo, Texas 76008
(817) 441-7181

Burleson
Nelda Cunniff, D.O.
780-B N.E. Alsbury Blvd.
Burleson, Texas 76028
(817) 447-8080

Candleridge
Alfred Hulse, D.O.
Daniel Sneed, D.O.
7311 S. Hulen St.
Fort Worth, Texas 76133
(817) 346-1925

East Berry
Larry Burrows, D.O.
Harold Johnson, D.O.
3514 E. Berry St.
Fort Worth, Texas 76105
(817) 531-2801

Fossil Creek
Gordon McWatt, D.O.
Diane Walter, D.O.
3300 Western Center Blvd.
Suite 114A&B
Fort Worth, Texas 76137
(817) 232-9767

Mansfield
Gary Wolf, D.O.
501 E. Broad Street
Mansfield, Texas 76063
(817) 473-6750

Saginaw
Suzanne Schafer, D.O.
Diane Walter, D.O.
120 W. McLeroy
Saginaw, Texas 76179
(817) 232-9877

University
Kathryn Schmidt, D.O.
3750 S. University Drive
Fort Worth, Texas 76109
(817) 924-6582

Western Hills
Loraine Yeoham, D.O.
Ernest L. Phillips, Jr., D.O.
3312 Phoenix Drive
Fort Worth, Texas 76116
(817) 244-1313

OMCT Awards Scholarships To Two High School Seniors

Twenty high school seniors entered Osteopathic Medical Center of Texas' V.L. Jennings Outpatient Pavilion with anxious grins and sweaty palms. Their parents and supportive coaches walked proudly by their sides. Anticipation filled the room as guests waited to discover who would receive this year's Cowtown Marathon Track Scholar-Athlete Scholarships, presented annually by Osteopathic Medical Center of Texas.

A committee of osteopathic physicians, community leaders and Cowtown Marathon board members made the difficult decision of selecting 20 semifinalists for the scholarship. After carefully reviewing the applicants' qualifications, three male and three female finalists were selected.

It was very difficult trying to choose from such talented athletes," said Sam Pearson, D.O., chairman of the selection committee. "The winners were chosen with an emphasis on their academic achievements as well as their athletic abilities."

Scott Murray, director of KXAS Channel 5 Sports and host of ceremonies, presented a check for \$1,500 to scholarship recipients Dana Frausto and Brandon Smith. Murray, in a black-and-purple nylon sweatsuit and running shoes, brought feelings of good humor and high-profile to the ceremony. He joked with Frausto saying, "Congratulations, here is your check for \$100,000."

Dana Frausto, of Grapevine High School, is team captain of her track team, a member of the cross country and gymnastics teams, National Honor Society, Youth Choir and ranked 12th in a class of 602 seniors. Brandon Smith, of Euless High School, is a member of the track and cross country teams, student council president, newspaper editor and is in the top 25 percent of his class.



(L to R) Doug Kurtis - Guest Runner, Jody Hawkins - Guest Runner, Sam Pearson, D.O., Ed Eyestone - Guest Runner, Bill Rodgers - Guest Runner.

Special guests at the ceremony were Bill Rodgers, a four-time winner of both the New York City and the Boston Marathons; Jody Hawkins, a first-place winner of the River City 10-miler in Austin and the Austin Half-marathon in 1993; Ed Eyestone, a two-time USA Olympic team member; and Doug Kurtis, a first-place winner in the master's division of the Boston Marathon in 1994. These guests congratulated the 20 semifinalists and presented each with a certificate.

OMCT promotes the lifelong awareness of the benefits of participating in sports and other activities geared toward healthy lifestyles, and is a major sponsor of the annual Cowtown Marathon and 10K Run. As a sponsor, OMCT continues to invest in both the community and the future by helping students demonstrate their abilities both on and off the track.

New Television Education Program Started At OMCT

Channel surfers at Osteopathic Medical Center of Texas will have a new "wave" to catch with the hospital's media education program: Channel 2 has been designated for patient education, and Channel 15 has been programmed for staff education.

OMCT has subscribed to Health Sciences Television network (HSTN), which, among other things, will offer approved continuing education credits for the staff. The CE and CME programs will be videotaped from HSTN; Staff Development will issue a schedule for when the programs will be aired. To receive credit for watching the program, staff members must contact Staff Development and receive a copy of the syllabus and a copy of the post-test. After watching the program, staff members will complete the test and return it to the Staff Development office. HSTN will receive the post-tests promptly and issue certificates for CE credit.

"This will make it much easier for employees to keep up with their continuing education hours for their respective licenses," says Maria Wallace, staff educator. In addition to the CE programs, Channel 15 will be playing programs on other

important issues like safety, upcoming inspections and new products. Channel 2 will be playing educational programs for the patients, which will include topics like Managing Your Diabetes, Cardiac Rehabilitation, Talking to Your Family About Advance Directives, and encore performances of OHST's Prevention Works Wonders Workshops.

The staff television locations are in Human Resources, Purchasing, the Board Room, the Physician's Dining Room and the Private Dining Room, the Cath Lab Conference Room, the Medical Education Room, Endoscopy, Cardiac Rehab, the Skilled Nursing Facility, the RehabCenter, Pediatrics, 4 Tower, Oncology, Telemetry, 5 Tower, Postpartum and the Psychiatric Unit.

Osteopathic Health System of Texas is the largest osteopathic health care provider in Texas. OHST is the corporate parent of Osteopathic Medical Center of Texas, a 265 bed regional referral hospital serving North Central Texas. OMCT serves as the primary teaching hospital for the Texas College of Osteopathic Medicine at the University of North Texas Health Science Center at Fort Worth. ■

Public Health Notes

Status of Combination Antiretroviral Therapy for HIV Disease as of February, 1995

Nick U. Curry, MD, MPH, FACP

Foreword

For some time now, it has been anticipated that combination antiretroviral therapy would be the next major advance in the therapeutic battle against HIV. Volume 5, No. 2 of *HIV/AIDS Clinical Insight* (January, 1995) states, "Combination therapy and protease inhibitors are generally expected to be the next significant advances in antiretroviral therapy." The hope is that combination therapy might decrease or control the emergence of drug-resistant strains of HIV. However, strong scientific evidence for sustained benefit from combination antiretroviral therapy is yet to be demonstrated.

Currently, only one combination of antiretrovirals has FDA approval for general use: Zidovudine plus Zalcitabine (AZT + ddC). The most recent study of this combination (*Annals of Internal Medicine* 1995;122) indicates that the combination showed no benefit in comparison to monotherapy for patients with fewer than 150 CD4 cells/mm³. Interestingly, trend analysis suggests that patients with 150 CD4 cells/mm³ or greater were less likely to have disease progression or die than those on AZT alone. So, while the benefit of combination therapy in late disease may be questionable, there may be hope that this combination will be of benefit to those who have not progressed so far along the disease continuum.

We cannot say what future hope combination therapy may hold. The scientific evidence is just not available. No approved dosages are established for any combination other than the AZT-ddC combination and no long-term studies have been reported to my knowledge. For now, we can only anticipate that the hope for combination therapy, expressed by many, will shortly blossom into reality.

Current Knowledge On Viral Burden

Recent research indicates that the level of infection with HIV is much higher than previously believed, and that viral replication continues at a

rapid rate throughout the infection. The period of clinical latency does not represent a period of biologic latency. The massive dissemination of HIV is held in check by a very effective host immune response which continues for several years until the immune system itself is overwhelmed.

Following infection, a series of events is initiated:

- Rapid, early dissemination of the virus.
- Seeding of the virus in lymphoid tissues throughout the body.
- Partially effective immune response which down-regulates viral expression.
- Persistent viral replication despite the active immune response.
- Sequestration of extracellular virus in lymph node germinal centers.
- Chronic immune system activation with T-cell activation.
- Subsequent accelerated viral replication.
- Increasing diversity of viral genotypes and emergence of cytopathic variants.
- Eventual destruction of remaining lymphoid cells.
- Dissemination of virus throughout the body, advanced disease and death.

Shortly after the initial infection with HIV, the CD4 count drops precipitously and high levels of HIV are detectable in the plasma. This period corresponds to the syndrome of initial HIV infection. Within a few weeks, virus becomes undetectable in the plasma and the CD4 count rises, but not to its pre-infection level. The individual may continue in this state of clinical latency for several years. However, the virus continues to replicate throughout this period and in most cases, eventually overwhelms the immune response as it, bit by bit, destroys lymphocyte population to the point at which lymphocyte production cannot keep pace with lymphocyte destruction and viral production.

Viral Variability

HIV is extremely genetically diverse. This is the result of a high viral mutation rate, caused in part by the error-prone nature of reverse transcription. HIV has been described as a

"swarm" of related by genotypical distinct viruses which are referred to as quasispecies. HIV types can be characterized by certain phenomena. They may be syncytium inducing (SI) or nonsyncytium inducing (NSI); have high or low replication capacity; and be T-cell tropic or monocyte/macrophage tropic. In general, those types that are syncytium inducing, T-cell tropic and highly replicative are associated with later stage disease and rapid progression of disease.

Clinical Use Of Viral Burden Markers

There is a significant effort being made to establish true markers of therapeutic efficacy in HIV disease. Having such reliable markers would be enormously helpful in clinical practice. There are now two recently perfected laboratory methods for the measurement of viral burden. They are *quantitative competitive PCR HIV-RNA* and *branched chain DNA (bDNA)*. Studies have demonstrated a strong correlation between viral burden determined by these techniques and clinical stage. What is still to be determined is whether these tools can be used in a predictive way as opposed to simply staging disease.

For the present, both methods have limited availability but should become important clinical tools once they become widely available. Most practitioners should continue to use CD4 count and percentage as a standard to evaluate disease stage and response to therapy until the *PCR* and *branched chain DNA* tools become available in their area.

Viral Resistance and Combination Therapy Theory

At this time, there are four nucleoside analog reverse transcriptase inhibitors (NRTI) marketed for treatment of HIV infection. Trials are being conducted on nonnucleoside reverse transcriptase inhibitors (NNRTI). Trials are also being conducted on protease inhibitors (PI).

Viral resistance is quite complex

availability of a variety of medications which would lessen the impact of resistance is naturally desirable. Viral mutation is also quite frequent and this makes achieving successful therapeutic results more difficult.

Resistance to the NRTIs is related to specific reverse transcriptase mutations. The mutations may interact and the effect of one mutation may be dependent on other mutations. As examples, a mutation causing increased resistance to one NARTI may also cause increased susceptibility to another; significant resistance to AZT may be associated with only minimal resistance to ddI or ddC; a mutation which causes resistance to ddI and ddC may increase viral susceptibility to AZT. The presence of mutations that would ordinarily result in resistance to AZT. Early, drug resistance in HIV is not a simple matter. The realization that drug resistance to NNRTIs and PIs exists makes matters even more complex. It appears that resistance to the nucleoside reverse transcriptase inhibitors may develop in a matter of a few weeks in some instances. Resistance to protease inhibitors is now more clearly documented.

The clinical significance of resistance to the various antiretroviral agents remains unclear. Intuitively, one would expect development of resistance to have a negative impact on disease status as well as viral load. However, this is yet to be clearly established in a series of well-designed studies. It also seems intuitively reasonable that the occurrence of resistance during monotherapy would provide a theoretical argument for combination therapy. Viral genotypes that are less susceptible to one antiretroviral may be more susceptible to another. Combination therapy might greatly increase overall antiretroviral coverage. The interactions among the viral swarm, the host and the medications, however, are likely to be complex and not as simple as adding more drugs and getting better results. That information must be obtained from additional research.

Current Issues In Combination Therapy

The recently reported AZT-ddC study in *Annals of Internal Medicine* is discussed earlier. While showing

no advantage to combination therapy for individuals with CD4 counts below 150 cells/mm³, it did suggest that there may be some advantage to the combination over AZT alone for those with higher CD4 counts at the time therapy is initiated. ACTG 229 studied the combination of AZT + ddC, ddC + saquinavir (protease inhibitor), and a combination of all three. This was a double-blind, placebo-controlled, 24 week study of individuals who had CD4 counts of 51-300 cells/mm³ and had received AZT monotherapy for at least four months. The triple therapy resulted in the best viral marker results but there was no statistical difference in clinical outcome among patients in the three groups. Michael Saag, MD, of the University of Alabama at Birmingham, has reported results from an uncontrolled study using combination therapy. He has used ddI + nevirapine (NNRTI), AZT + ddC + nevirapine, or AZT + ddI + nevirapine for an average of 25 weeks. All patients experienced significant reductions in viral burden when nevirapine was added. However, long-term effects of these combinations varied considerably from patient to patient and showed no consistently discernible pattern.

Conclusions

- Genetics of HIV-1 are a major cause of drug resistance due to the presence of numerous quasispecies.
- The theoretical benefits of combination therapy remain to be clearly demonstrated in clinical medicine at this time.
- AZT plus ddC is the only approved combination of antiretrovirals currently available.
- Toxicity profiles must be considered in any plan to combine the use of such potent drugs.
- The use of combination therapy is likely to be most effective when implemented early in the infection as opposed to late stage infection.
- PCR and branched chain DNA are the state-of-the-art tests for determining viral burden and disease stage.
- We remain hopeful that scientifically documented combination antiretroviral therapies that improve clinical outcomes will become available over the next several years. ■

New Theory Offered On Gulf War Syndrome

Preliminary findings indicate that a combination of anti-nerve-gas pills and anti-insect compounds may be the cause of a mass of illnesses reported by 37,000 veterans of the Persian Gulf War. Known as Gulf War Syndrome, the cluster of ailments have baffled health care providers since the vets returned home. Researchers from Duke University Medical Center recently found that when lab animals were exposed to the same combination of chemicals given to U. S. troops, nervous system damage occurred in the animals.

In March of 1995, the Pentagon noted that no single cause of Gulf War Syndrome had been found. Updated figures from a Pentagon medical evaluation program of gulf war vets were then released, revealing that in 84 percent of cases, a clear diagnosis of

health problems could be found. Approximately 15,000 vets are participating in the Pentagon program.

At the request of the Veterans Affairs Department, the deputy director of Duke University Medical Center's toxicology program will travel to Washington to present the data culled from the research. ■

Social Security Becomes Agency

The Social Security Administration has become an independent agency, no longer a part of the Department of Health and Human Services. Congress authorized the move last year, saying such a step would allow the agency to fight for resources and employees. ■

Opportunities Unlimited

PHYSICIANS WANTED

FORT WORTH AREA FP-GP CLINIC needs an additional GP for full or part time. No OB, no hospital required. 817-924-7978. (02)

PHYSICIAN-OWNED EMERGENCY GROUP - is seeking Full or Part-time D.O. or M.D. emergency physicians who practice quality emergency medicine. BC/BE encouraged, but not required. Flexible schedules, competitive salary with malpractice provided. Send CV to Glenn Calabrese, D.O., FACEP, OPEM Associates, P.A., 4916 Camp Bowie Blvd., Suite 208, Fort Worth, 76107. 817-731-8776. FAX 817-731-9590. (16)

FACULTY POSITION - The Department of Manipulative Medicine at the University of North Texas Health Science Center at Fort Worth is accepting applications for a faculty position. Applicants must be a graduate of approved college of medicine or osteopathic medicine with three years post graduate training and be BE/BC and must qualify for licensure in the State of Texas. A letter of interest and a curriculum vitae should be sent to: David A. Vick, D.O., Chairman, Department of Manipulative Medicine, UNT Health Science Center, 3500 Camp Bowie Blvd., Fort Worth, TX 76107. UNT Health Science Center is an EEO/AA Employer and Educator. (08)

DALLAS/FORT WORTH - Physician Opportunity to work in low stress, office based practice. Regular office hours. Lucrative salary plus benefits. No call, no weekends, and no emergencies. Please call Lisa Cole at 800-254-6425 or fax CV to 214-256-1181. (25)

GP/FP NEEDED IN AMARILLO - Primary care including office practice, nursing home and hospital work. Specialist referral available in osteopathic hospital or medical center. Three other D.O.s to share coverage. Negotiable salary, guarantee, or other arrangement as desired. 806-379-7770. Fax 806-379-7780. (31)

PHYSICIAN WITH TEXAS LICENSE needed to work in a primary care medical clinic on the campus of the University of North Texas. Experience required in a primary care practice. No call duty. Excellent benefits. Salary is determined by experience and/or certification in a primary care specialty. Contact the University of North Texas, Student Health Center, P.O. Box 5158, Denton, TX 76203, 817-565-2786. Equal Opportunity/Affirmative Action Employer. (47)

INTERNAL MEDICINE - Immediate opening for BE/BC internal medicine D.O. at 54-bed hospital in Tyler, Texas. Approximately 30-members referral base with multiple specialties. Office space available within medical complex or in outlying clinics. P.H.O. with approximately 120,000 insured individuals. Hunting, fishing, watersports, country clubs, university, junior college, many recreational facilities, civic and social opportunities. Contact Olie E. Clem, C.E.O., at 903-561-3771. (50)

FAMILY PRACTICE D.O.s - Practice opportunities for physicians at 54-bed facility in beautiful Tyler, Texas. Active staff of over 30 physicians with 8 specialties represented. Office space available near hospital or may share established very active practices in communities near Tyler. Outlying clinics located in 4 nearby communities. P.H.O. with approximately 120,000 insured individuals. Hunting, fishing, watersports, country clubs, university, junior college, many recreational facilities, civic and social opportunities. Contact Olie E. Clem, C.E.O., at 903-561-3771. (52)

HOUSTON, TEXAS - Wanted Immediately/Full-time/Family Practice or Internal Medicine Board Eligible/Board Certified. Salary negotiable. Send CV. FAX 713-778-0839; Attn: Madeline. (54)

OB/GYN TO SHARE CALL - BE/BC physician sought to maintain private practice and to rotate call with BC OB/GYN physician at 54-bed acute care facility in Tyler. Referral base of over 30 physicians covering 6 communities. Office space available in hospital complex. Access is available to approximately 120,000 insured individuals through membership in P.H.O. Wonderful family community offers hunting, fishing, watersports, golf, country clubs, university (U.T.), junior college, many recreational facilities, civic and social opportunities and much more. Contact Olie E. Clem, C.E.O., at 903-561-3771. (55)

POSITIONS DESIRED

BOARD CERTIFIED GENERAL PRACTITIONER - working as independent contractor. Ten years experience. Available by appointment. \$100 per hour plus expenses. Will furnish liability insurance. No obstetrics, please. Contact: TOMA, Box 27, One Financial Center, 1717 North IH 35, Suite 100, Round Rock, TX 78664-2901. (27)

LOCUM TENEN - Independent Contractor. Board Certified Family Practitioner with emergency medicine experience. Liability insurance provided. Seven years experience in the DFW metropolplex. References, competitive rates, appointment. Contact: 817-473-3119. (32)

OFFICE SPACE AVAILABLE

GULF COAST CLINIC - 4,100 sq. ft. include lab and (4) suites. Near Navy base on beautiful Gulf of Mexico. Growing Community. Hospital and nursing home three blocks away. Lease (possible purchase in future). Contact Mrs. Kumm 512-758-3669. (17)

DFW/HEB, TEXAS AREA - FOR REN MEDICAL OFFICE - Large fully furnished executive medical office suite for rent by the hour/day. Reception area, front office physician's office, 3 examining room w/sinks, lab room, private restroom. Access on-site X-ray, Ambulatory Surgery Center Physical Therapy Department, CT-scanner. Located centrally in Hurst, TX. Ideal for 2nd office or Branch office. Great location negotiable rates. For details, call Sean 817-282-6905. (07)

MISCELLANEOUS

RECONDITIONED EQUIPMENT FOR SALE - Examination tables, electrocardiographs, sterilizers, centrifuge whirlpools, medical laboratory equipment view boxes, weight scales, IV stands a much more. 40-50 percent savings, guaranteed. Mediquip-Scientific, Dallas 214-630-1660. (14)

INTERNAL MEDICINE EQUIPMENT FOR SALE - Electrocardiogram, GYN table Misc. Office Supplies, Some Office Equipment (including computer billing Single Channel Cardiac Stress Equipment, Contact: Dr. R. J. Breckenridge at 903-561-1608. (18)

FOR SALE - LATE MODEL 300 MA ray and processor with view box accessories; hydraulic stretcher; transport stretchers; Coulter counter and dilution storage cabinets; office desk; assorted other items - very good condition. Contact: Glen Dow or Office Manager 817-485-4711. (48)

How do you treat severe paralysis of the paycheck?

Medical school probably covered everything except how to deal with a disability. It can happen to anyone. Even you. In fact, if you're 35 now, you have a 45 percent chance of becoming disabled before age 65.¹ Without disability insurance, that's a 45 percent chance your income could wind up in critical condition. Should disability strike, how long could you keep your home? Make car payments? Provide for your family?

Provident, the nation's leader in individual non-cancellable disability insurance,² can provide the perfect prescription, offering comprehen-

sive "your occupation" protection. That means Provident pays if you can no longer work in your own medical specialty regardless of how much you earn working in a new career or a new specialty. And the policy is non-cancellable, so your premium rate will be guaranteed for as long as you own the policy.³

Make an appointment for a disability insurance checkup. Call Dean, Jacobson Financial Services for more information about this important coverage. We have more than 25 years of experience in the medical profession. Discounts are available to TOMA members.

¹ 1985 Commissioner's Individual Disability Table-A, Seven-day Elimination Continuation Table. Rates are male only. Disability rates are higher for females.

² Life Insurance Marketing and Research Association, 1992 survey, individual, non-cancellable disability income insurance as measured in annualized premium in force, new paid annualized premium, new paid policies, and policies in force.

³ Coverage for mental disorders can be limited in certain circumstances for a reduced premium.

Dean, Jacobson Financial Services

(817) 335-3214 ■ P.O. Box 470185
Fort Worth, TX 76147

Dallas/Fort Worth metro area:
(817) 429-0460 ■ (800) 321-0246

Provident Means Business

**PROVIDENT
LIFE & ACCIDENT
INSURANCE COMPANY**

ACCIDENT DEPARTMENT

1 FOUNTAIN SQUARE
CHATTANOOGA, TN 37402

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION
One Financial Center
1717 North IH 35, Suite 100
Round Rock, Texas 78664-2901

ADDRESS CORRECTION REQUESTED

BULK RATE
U.S. POSTAGE
PAID
FORT WORTH, TEXAS
Permit No. 1646

ANNOUNCING
A REVOLUTIONARY NEW CONCEPT FOR
YOUR
PROTECTION



ASSET AND INCOME PROTECTION INSURANCE

Protecting the financial rewards of a lifetime of work can be almost as difficult as achieving them. It is for this reason that Asset and Income Protection (AIP) insurance was developed. AIP is not just medical malpractice insurance. AIP is an indemnity policy that will pay **You** for **Your** loss should **Your** assets be seized as a result of a malpractice judgment.

THE BENEFITS OF AIP

- Additional protection for personal assets
- Low premium costs
- Simple underwriting requirements
- Indemnification of loss of future income
- Reduced need to transfer title of assets

AIP is brought to you by the same people who have brought you Physician's Choice for the past 10 years. AIP is a proprietary product owned by Oceanic Holdings, Inc. (OHI) and made available through Underwriters Reinsurance Company, an "A" rated carrier. The exclusive agent in Texas for AIP is National Health Services located in Houston.

For additional information and an application contact:

NATIONAL HEALTH SERVICES
P.O. Drawer 1543
Friendswood, TX 77546
(800) 634-9513

OCEANIC HOLDINGS, INC.
4984 El Camino Real, Suite 100
Los Altos, CA 94022
(800) 366-1432

OCEANIC HOLDINGS, INC.

AIP is an endorsed product of TOMA