



Who's covering you . . . doctor?

**Texas Osteopathic
Political Action Committee**

PHONE

For Your Information

American Osteopathic Association	312/280-5800 800/621-1773 202/783-3434
Washington Office	
American Osteopathic Hospital Association	703/684-7700
Professional Mutual Insurance Company	800/821-3515
Risk Retention Group	816/523-1835
TOMA Malpractice Insurance Program:	
For Premium Rates,	
Enrollment & Information	800/544-8560
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	214/647-2282
Profile Questions	214/669-7408
Provider Numbers:	
Established new physician (solo)	214/669-6162
Established new physician (group)	214/669-6163
All changes to existing provider number records	214/669-6158
Texas Medical Foundation	512/329-6610
Medicare/Medicaid General Inquiry	800/252-9216
Medicare Beneficiary Inquiry	800/252-8315
Medicare Preadmission/Preprocedure	800/252-8293
Private Review Preadmission/ Preprocedure	800/252-9225
Private Review General Inquiry	800/252-9225
Texas Osteopathic Medical Association	817/336-0549 in Texas 800/772-5993 Dallas Metro 429-9755
TOMA Med-Search	in Texas 800/772-5993
TEXAS STATE AGENCIES:	
Department of Human Services	512/450-3011
Department of Public Safety:	
Controlled Substances Division	512/465-2188
Triplicate Prescription Section	512/465-2189
State Board of Health	512/458-7111
State Board of Medical Examiners	512/452-1078
State Board of Pharmacy	512/832-0661
State of Texas Poison Center for Doctors & Hospitals Only	713/765-1420 800/392-8548
	Houston Metro 654-1701
FEDERAL AGENCIES:	
Drug Enforcement Administration:	
For state narcotics number	512/465-2000 ext 3074
For DEA number (form 224)	214/767-7250
CANCER INFORMATION:	
Cancer Information Service	713/792-3245 in Texas 800/392-2040

Texas DO

Texas Osteopathic
Medical Association
February 1988

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*ON THE COVER: Artwork printed with the permission of
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- Alcohol and Drug Abuse
- Stress Management
- Blended and Step Families

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Harris Methodist Health Plan (HMO/PPO)

921 5th Avenue
Ft. Worth, TX 76104
(817) 335-5925

Calendar of Events



FEBRUARY

7-14

Annual Meeting ACGPOMS
Palm Springs, CA

Contact: Bette Vaught, Exec. Director
2045 S. Arlington Heights
Road, Suite 104
Arlington Heights, IL 60005
800/323-0794

MARCH

5

Fourth Annual Conference:
Fitness in Sports

Topic: *Diagnosis and Management
of Common Sports Injuries*

TCOM — Kiva Room, Med Ed II

Contact: Cheryl Cooper,
Coordinator CME
TCOM
817/735-2539

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Board of Trustees Meeting
TOMA

Fort Worth

Contact: Tom Hanstrom
Executive Director
226 Bailey Avenue
Fort Worth, 76107
817/336-0549 or
800/772-5993 in TX

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1988 Convocation Program
A.T. Still: His Philosophy Today
American Academy of Osteopathy
The Broadmoor
Colorado Springs, CO

Contact: Mrs. Vicki E. Dyson
AAO Executive Director
P.O. Box 750
Newark, OH 43055
614/349-8701

APRIL

2

*A Spring Update for the Family
Practitioner — II*

Dallas Family Hospital

Contact: Cheryl Cooper,
Coordinator CME
TCOM
817/735-2539

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Board of Trustees Meeting
TOMA

Galvez Hotel, Galveston

Contact: Tom Hanstrom
Executive Director
226 Bailey Avenue
Fort Worth, 76107
817/336-0549 or
800/772-5993 in TX

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House of Delegates Meeting
TOMA

Galvez Hotel, Galveston

Contact: Tom Hanstrom
Executive Director
226 Bailey Avenue
Fort Worth, 76107
817/336-0549 or
800/772-5993 in TX

28-30

*89th Annual Convention and
Scientific Seminar*

TOMA

Galvez Hotel/Moody Conv. Ctr.
Galveston, TX

Contact: Tom Hanstrom
Executive Director
226 Bailey Avenue
Fort Worth, 76107
817/336-0549 or
800/772-5993 in TX

JULY

28-August 1

House of Delegates Meeting
AOA

Miami, FL

Contact: Ann W. Wittner
Director of Administration
142 S. Ontario St.
Chicago, IL
60611-2864
800/621-1773

NOVEMBER

12-13

*Mid-Year Scientific Seminar/
Legislative Forum*

(formerly)

*Public Health Seminar/Legislative
Forum*

TOMA

(place to be announced)

Contact: Tom Hanstrom
Executive Director
226 Bailey Avenue
Fort Worth, 76107
817/336-0549 or
800/772-5993 in TX

DECEMBER

4-8

*Annual Convention and Scientific
Seminar*

AOA

Las Vegas, NV

Contact: AOA Bureau of Conv.
142 E. Ontario St.
Chicago, IL 60611-2864
800/621/1773

TOPAC — What's In It For You?

Whether or not you have ever contributed to the Texas Osteopathic Political Action Committee (TOPAC), you are the beneficiaries of past achievements, borne by those who contributed for the good of the entire osteopathic profession. Unfortunately, those who do help fund TOPAC cannot go on shouldering the burden indefinitely. If physicians are to continue to enjoy the practice rights that they now have, healthy contributions to political action committees are essential.

Our profession must be active in political campaigns, both in terms of volunteering time and contributing monies, during the even-numbered years, and in legislative action during the odd-numbered years. Keeping TOPAC healthy on an annual basis is an absolute must for the kind of strategy that the osteopathic profession must embrace to continue to ensure and enhance practice opportunities in the State of Texas.

In essence, TOPAC is a structure which helps generate financial aid in order to encourage positive legislative responses in the ever-shifting health care environment. Strategic planning is thus ensured and our forward-looking TOPAC attains the goal of positive survival.

Contributions to TOPAC give us the assurance that the best representatives available are elected and working in Austin, and most importantly, that they are aware of our problems. It has been said, "The ballot is stronger than the bullet." This we know to be so very true. By making significant contributions, we are thus able to communicate more effectively and favorably with the representatives that are elected.

We have been fortunate throughout the years in maintaining a number of influential friends in the Legislature. However, in order to keep such a continuation of individuals who support our causes and are familiar with our philosophy, it is necessary that we support them, both financially and with volunteer efforts, in terms of supporting their re-election campaigns. This is an important area where you can be involved, both by contributing to TOPAC and volunteering your time during re-election campaigns in your local area.

Although the Legislature in Texas sits every other year, it works on a continuous basis. The next session convenes in January 1989 and it is never too early to begin our strategy for the next session. We have already set priorities which include tort reform and the intrusion into the practice of medicine by other health care professionals and attorneys. Other concerns likely will develop in areas such as PPOs, HMOs, and mandatory

assignment of Medicare benefits. The mandatory assignment issue which took root in Massachusetts in 1981 has created furor in 17 states, and while it failed in at least 10 states in 1987, the battle is ongoing in other states.

TOMA members by now should have noted modifications to the TOPAC contribution statement. Although large contributions from as many individuals are important, we emphasize the fact that donations of any size are sincerely appreciated. We also would like to stress that contributing a small amount several times is as important as contributing one large lump sum. If we were able to average a contribution of \$200 per member in this state, we could nearly triple our efforts and achieve the goals we have set for the next session.

We offer special encouragement to the younger, new practitioners, who may not have ever considered contributing. Any amount will go a long way in starting a meaningful program of TOPAC contributions that can be continued in the years to come.

It should be noted that there will be quarterly reporting to the District presidents on all contributions made by TOPAC to the various candidates and legislators. In this way, contributors will be kept aware of where their money has been targeted. If you feel that appropriate individuals are not receiving TOPAC contributions, TOMA would like to hear from you with your suggestions.

The concept of becoming acquainted with the legislators in your district cannot be stressed enough. Go to know them, work in their campaigns, contribute to them and invite them to become part of your district activities, at least on an annual basis. This will provide with an essential grass roots level from which we can call upon them when their assistance is needed in the Legislature.

As we attempt to revitalize TOPAC, we strongly urge you to rethink your commitment to TOPAC, and try to contribute more than you have in the past. The ultimate responsibility for the success of our political action committee rests with you. You are vital in maintaining our present practice rights and future achievements in medicine's competitive environment. A positive attitude in the success of TOPAC will ultimately determine the future course of the profession. We do, indeed, "reap what we sow".

TOPAC — what's in it for you? Among others, the preservation of private practice, perhaps the most important issue of all.

We bring people together with a facility for healing.



Together, we can provide medicine of uncompromising quality. At Northeast Community Hospital, we bring together the finest doctors, nurses and technicians available in obstetrics, 24-hour emergency services, ICU/CCU, pediatrics, in-/out-patient surgery, oncology, telemetry, extended physical rehabilitation and environmental care. We look for people who understand the human side of medicine, people with a real facility for healing.

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HEALTHTRUST
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Introducing 1988 Annual Convention Speakers



"Evaluation and Treatment of Hand Injuries" is the topic to be discussed by Peter B. Ajluni, D.O., during the 1988 TOMA Annual Convention and Scientific Seminar in Galveston. Since injuries to the hand are very common and initial appropriate treatment is very important, as it may determine the final outcome and degree of recovery, Dr.

Ajluni will discuss initial treatment in the emergency room; history and physical examination; soft tissue injury; bony injuries (fractures and dislocations); and potpourri of hand problems.

A 1969 graduate of Chicago College of Osteopathic Medicine, Dr. Ajluni completed a rotating internship at Mt. Clemens General Hospital, followed by a residency in orthopedic surgery at the same location. He went on to complete a fellowship in hand surgery at Grace Hospital in Detroit and has been in the private practice of orthopedic surgery in the Mt. Clemens area since 1974.

Board certified in orthopedic surgery, Dr. Ajluni is a member of the AOA, Michigan Association of Osteopathic Physicians and Surgeons, American Osteopathic Academy of Orthopedics, Hand Surgery Section of the American Osteopathic Academy and the Michigan Osteopathic Orthopedic Association, among others.



Jay G. Beckwith, D.O., will be presenting a lecture on "Current and New Treatment of Peptic Ulcer Disease".

A 1967 graduate of Kirksville College of Osteopathic Medicine, Dr. Beckwith completed his internship at Oklahoma Osteopathic Hospital, his residency at Detroit Osteopathic Hospital and took a fellowship at Tuft's School of Medicine in Massachusetts. He is certified in internal medicine with a sub-specialty in gastroenterology.

Some of his memberships include TOMA, TOMA District II, AOA, American College of Osteopathic Internists, and the American Endoscopic Association. He has served in numerous positions at TCOM and Fort Worth Osteopathic Medical Center. Dr. Beckwith currently maintains a practice in internal medicine and gastroenterology in Fort Worth.

"Newer Antiarrhythmics From the Layman's Point of View" will be presented by Edward W. Dick, M.D., of

Tucson, Arizona. Dr. Dick will be discussing some of the newer antiarrhythmic drugs and hopes to give a working knowledge of these agents, since primary care physicians are frequently required to deal with patients in relationship to these agents, thus, some perspective as to their use is necessary.



Dr. Dick received his M.D. degree from Georgetown University Medical School in Washington, D.C. and interned at Chicago Wesley Memorial Hospital. He took a residency in internal medicine at Northwestern Memorial Hospital, Illinois, and a fellowship in cardiovascular diseases at the VA Hospital in Washington, D.C.

He is a diplomate of Cardiovascular Diseases, the American Board of Internal Medicine and the National Board of Medical Examiners. He is also a fellow of the American College of Cardiology, member of the American College of Physicians, board member of the Southern Arizona Division of the American Heart Association, member of the Rotary Club of Tucson, and a clinical instructor in the division of cardiology at the University of Arizona Health Sciences Center.

Russell G. Fisher, D.O., will be presenting two topics during this year's convention; "Update on EKG Interpretation" and "Non-Q-Wave Infarct".



A 1978 graduate of Philadelphia College of Osteopathic Medicine, he served a rotating internship at the U.S. Public Health Service Hospital in New York. Dr. Fisher completed a residency in internal medicine, also at the U.S. Public Health Service Hospital, and a fellowship in cardiology at New York University/Booth Memorial Medical Center and the Cleveland Clinic Foundation in Ohio. Additional postgraduate training included electrophysiology at New York Medical College and at Cleveland Clinic Foundation.

Dr. Fisher is board eligible in internal medicine and cardiology and serves as an assistant professor of medicine/cardiology at TCOM. Some of his many memberships include TOMA, TOMA District II, American College of Cardiology, American College of Physicians, American Heart Association and the National Association of Pacing and Electrophysiology. ▶



Dudley W. Goetz, D.O., FAOCD, will present the topic "What's New in Dermatology" during the 1988 TOMA convention. This presentation is designed to provide attendees with an up-to-date review of new and important information in dermatology and will cover recent advances, which will include psoriasis, herpes simplex, herpes zoster, photobiology and pediatric dermatology.

A 1970 graduate of Philadelphia College of Osteopathic Medicine, Dr. Goetz took a rotating internship at Pontiac Osteopathic Hospital and a preceptorship in dermatology, also in Michigan. He is a diplomate of the National Board of Examiners for Osteopathic Physicians and Surgeons and, in 1980, received certification by the American Osteopathic Board of Dermatology. In 1983, he was elected a fellow of the American Osteopathic College of Dermatology.

Some current memberships include TOMA, TOMA District II, AOA, American Academy of Dermatology, American Osteopathic College of Dermatology, and the Society for Investigative Dermatology.



"Post Viral Bronchial Hyperactivity Syndrome" is the topic to be presented by David Ostransky, D.O. He will be discussing the association of viral respiratory infections and asthma, which is frequently ignored and misdiagnosed as bronchitis or other respiratory conditions with inappropriate diagnostic testing and therapy.

Prompt recognition of post viral bronchial hyperactivity and specific therapy with broncho dilators can provide relief from airway obstruction. Respiratory infections can provoke asthma and evidence exists that viral respiratory infections have an important and probable causative role in the pathogenesis of airways hyperactivity in asthma.

Dr. Ostransky is a graduate of Kirksville College of Osteopathic Medicine and interned at Grandview Hospital in Ohio. He completed a residency in internal medicine at Grandview and followed that with a fellowship in pulmonary diseases. He is board eligible in internal medicine and in medical diseases of the chest.

His numerous memberships include TOMA, TOMA District II, AOA, American College of Osteopathic Internists, American College of Chest Physicians (affiliate), American Thoracic Society (associate), Texas Thoracic Society, American Heart Association of Tarrant County, the American Osteopathic College of Rehabilitation Medicine and the Tarrant County Chapter of the American Lung Association.

He presently serves as assistant professor of pulmonology and pulmonary medicine, pulmonary

division of the department of internal medicine at TCOM; medical director of pulmonary rehabilitation at Fort Worth Osteopathic Medical Center; as a consultant in pulmonology at Carswell Air Force Base Regional Hospital; medical director of respiratory therapy at Continental Suburban Hospital; and chairman of the pharmacy and therapeutics committee at FWOMC.

Don N. Peska, D.O., will present "Noninvasive Vascular Testing in the Office". The lecture will attempt to highlight the important considerations of early diagnosis of arterial and venous disease and the use of several testing modalities that can be utilized by the family physician in delineating the extent of this disease and determining the appropriate course of therapy.

A graduate of the College of Osteopathic Medicine and Surgery, Des Moines, Iowa, Dr. Peska interned at Martin Place Hospital in Michigan and served a residency in general surgery, also at Martin Place Hospital. He also took a residency in thoracic-cardiovascular surgery at Detroit Osteopathic Hospital.

Dr. Peska is board certified in thoracic-cardiovascular surgery by the American Osteopathic Board of Surgery and is vice-chairman of the division of thoracic and cardiovascular surgery of the American College of Osteopathic Surgeons. He is a diplomate of the National Board of Osteopathic Examiners, a member of TOMA and TOMA District II.

He serves as an assistant clinical professor of surgery at TCOM; chairman of the department of surgery at Fort Worth Osteopathic Medical Center; is an active member of the department of surgery at Northeast Community Hospital in Bedford; and is an associate member in the department of surgery at Dallas/Fort Worth Medical Center in Grand Prairie.

The remainder of the convention speakers will be featured in the March issue of the *Texas DO*. ■

Newsbrief

INSURERS USING BIGGER BAIT TO NET HEALTH CARE FRAUD

A computerized network system, which monitors health care claims sent to Medicare, Medicaid and private carriers, is expected to help in hooking providers who defraud or abuse insurance companies. Insurers believe that patterns of overbilling or excessive treatment, which might normally be overlooked, will be identified by the pooling of claims data. The system began operating in Florida in November and anticipates going nationwide this spring.

Risk Management Seminar Will Satisfy Various States' Re-licensure Requirements

A Risk Management Seminar will be held on Thursday and Friday, April 28 and 29, for those physicians renewing their licenses in Florida, Oklahoma and any other state requiring CME hours of risk management in order to retain licensure. Information presented during this seminar will cover the areas of malpractice, controlled substances, patient record keeping, impaired physicians and the Medical Practice Act.



Thursday, April 28, Eli Bernzweig, J.D., of Insurance Equities Corporation will discuss the malpractice issue. Mr. Bernzweig received his B.S. from Rutgers University and his J.D. from Rutgers Law School. Following admission to the bar and four years in the private practice of law in New York, he joined the Office of the Solicitor, U.S. Department of Labor, in 1957. In 1962 he transferred to the Office of General Counsel, H.E.W., where he served as Chief Legal Advisor to the U.S. Public Health Service hospital system and was H.E.W.'s top expert on medical malpractice.

From 1971-73, Mr. Bernzweig served as executive director of the H.E.W. Secretary's Commission on Medical Malpractice. He left government service in 1973 to become vice president for professional liability, Argonaut Insurance Company, Menlo Park, California. He returned to federal service in 1975 as Special Assistant to the Federal Insurance Administrator. In 1977, Mr. Bernzweig became a guest scholar at the Brookings Institution, Washington, D.C., where he undertook the research for a book critiquing the entire array of injury reparations systems. Work was completed on the book, *By Accident, Not Design*, in 1980.

From 1981-86, he was engaged as a professional consultant on the legal liability of health care personnel, financial planners and other professionals. During that period, he wrote a regular series of articles for *RN* magazine on the professional liability of nurses.

In June, 1986, he joined Insurance Equities Corporation, Palo Alto, California, as vice president in charge of loss control.

Also on Thursday, Mr. John Sortore, TOMA staff member, will lecture on controlled substances. Mr. Sortore is a graduate of the Institute of Applied Science

(Criminal and Civil Investigation and related subjects). He attended business courses at Texas Tech and U.T. Austin and law enforcement courses sponsored by the F.B.I., D.E.A., D.P.S. and other law enforcement organizations. He also attended specialized seminars in fingerprinting, educational programs sponsored by the TMA, the AMA and the Federation of State Medical Boards, among others.



Mr. Sortore served in the U.S. Army and Air Force from 1945-48 and from 1950-62, was a police officer in Lubbock, attaining the rank of Lieutenant of Detectives. In 1960, Mr. Sortore was a special investigator for the District Attorney of Lubbock County.

He served with the Texas State Board of Medical Examiners from 1963-85. During his tenure with the TSBME, he was an investigator, director of investigations and director of hearings. In 1985 he retired from the TSBME and became TOMA's field representative.

Other activities include consultant to the TMA Committee on Physician Health and Rehabilitation; lecturer on Jurisprudence classes at various medical schools, including TCOM, on drug laws and the Medical Practice Act; a member of TOMA's Physicians Assistance Program; and a speaker before various medical and allied health and civic groups regarding the Medical Practice Act and activities of the Board. Mr. Sortore will also be speaking on Friday on patient record keeping.

Following Mr. Sortore will be Mr. Michael G. Young, Staff Counsel for the Texas State Board of Medical Examiners, who will discuss the Medical Practice Act and what gets physicians into problem areas with the TSBME.



Mr. Young graduated from the University of Texas School of Law, Austin, and was admitted to the State Bar of Texas in 1976. He was administrative assistant for James C. Dunlap & Associates, Austin, from 1976-77 and worked for the TMA from 1978-86. While at TMA, Mr. Young served as a field service representative, director of the Department of Medical Services, director of the Office of Medical Ethics and as a TMA attorney.

Mr. Young is currently staff counsel for the TSBME. In this capacity, he responds to questions from licensees and members of the public regarding Texas law pertaining to physicians; advises the TSBME and its committees concerning legal implications of questions it considers; assists Board members in the conduct of administrative sanction proceedings; presents evidence at licensure hearings and drafts new or amended Board rules.



On Friday, TOMA member Joseph E. Wolpmann, D.O., will be discussing the subject of impaired physicians. A 1956 graduate of Kansas City College of Osteopathy and Surgery, he interned at Community Hospital in Houston. Dr. Wolpmann is currently in general practice in Midland.

Throughout the years, he has held many positions within TOMA, including member of the TOMA Board

of Trustees; House of Delegates; Peer Review Manual Committee; chairman of the Hospitals, Insurance and Peer Review Committee; and vice chairman of the Utilization Review Assistance Committee.

Dr. Wolpmann is currently a member of the TOMA Physicians Assistance Program and an active member of TOMA District IV. Serving as medical director at Clearview Hospital since 1985, he has just been named chief executive officer of the hospital. He is also a member of the American Society of Alcohol and Other Drug Dependencies and is an advisory board member of the Midland Council on Alcoholism; serves on the Drug Abuse Task Force of the Bishop's Committee of the Episcopal Diocese of Northwest Texas; the Permian Basin AIDS Task Force; and is a board member of the Permian Basin Child Abuse Prevention Program.

Dr. Wolpmann is a former national chairman of the board of the Palmer Drug Abuse Program. ■

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IDEAS

Smart ways to save. Letting Uncle Sam help you pay for your retirement. Alternatives to the standard will. Great ways to lower your tax liability.

SOLUTIONS

How to overcome the roadblocks to success. Evaluating risk levels. Bypassing probate through careful estate planning.

Hundreds of Texas residents have used our workshops to lower their tax bills while increasing income SAFELY . . . EFFECTIVELY . . . CREATIVELY. Why not invest a few hours of time and join them? You'll be glad you did.

DATE: TUESDAY, FEBRUARY 16, 1988
THURSDAY, FEBRUARY 18, 1988
TIME: 7:00 - 9:30 p.m.
PLACE: TOMA State Headquarters Building
226 Bailey Avenue, Fort Worth, Texas

**NO CHARGE
TO THE
PUBLIC**

Complimentary Investment,
Tax, and Estate Planning
Workbook to participants.

William H.
Dean and Associates

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CONVENTION PROGRAM '88

April 26

- 12:00 noon TOMA Board of Trustees' Luncheon
East Parlor/Hotel Galvez
- 1:00 p.m. TOMA Board of Trustees' Meeting
West Parlor/Hotel Galvez
- 6:30 p.m. Caucus of the Districts
Conference Room-B/Hotel Galvez

April 27

- 8:00 a.m. to 12:00 noon TOMA House of Delegates' Registration
Promenade/Hotel Galvez
- 9:00 a.m. TOMA House of Delegates' Meeting
Music Hall/Hotel Galvez
- 12:00 noon TOMA House of Delegates' Luncheon
Veranda/Hotel Galvez
- 1:00 p.m. ATOMA Board of Trustees' Luncheon
Conference-A (lower level)/Hotel Galvez
- 2:00 p.m. ATOMA Board of Trustees' Meeting
Conference-A (lower level)/Hotel Galvez
- 2:00 p.m. to 5:00 p.m. Early Registration
Exhibit Hall/Moody Convention Center

April 28

- 7:00 a.m. General Convention Breakfast
Convention Hall-2 (upper level)
Moody Convention Center
- 7:30 a.m. to 4:00 p.m. Registration
Exhibit Hall/Moody Convention Center

(ALL LECTURES WILL BE HELD BEHIND THE EXHIBIT HALL (lower level of the Moody Convention Center) UNLESS OTHERWISE NOTED)

- 8:00 a.m. "Spontaneous Dysfunction: Recognition & Reversal"
Robert Irvin, D.O.
- 8:45 a.m. "Update on EKG Interpretation"
Russell G. Fisher, D.O.
- 9:00 a.m. "Risk Management Seminar — Part 1"
Room C (upper level)/Convention Center
Eli Bernsweig, J.D.
Mr. John H. Sortore
Mr. Michael G. Young
- 9:00 a.m. ATOMA House of Delegates' Meeting
East Parlor/Hotel Galvez
- 10:15 a.m. Refreshment Break with Exhibitors
- 11:00 a.m. "New Antiarrhythmics from the Layman's Point of View"
Edward Dick, M.D.
- 12:00 noon "Anxiety Diagnosis & Current Treatment"
Gary Tollefson, M.D.
- 1:00 p.m. Keynote Luncheon
Convention Hall-2 (upper level)
Moody Convention Center
- 2:30 p.m. "Post Viral Bronchial Hyperactivity Syndrome"
David Ostransky, D.O.
- 3:15 p.m. "Non-Q-Wave Infarct"
Russell G. Fisher, D.O.
- 4-5:00 p.m. Visit Exhibits
- 5:00 p.m. POPPS Reception
East Parlor/Hotel Galvez
- 7:00 p.m. Sustainer's Party
Aboard the Colonel Paddle Wheeler
(Buses will begin boarding at 6:30 p.m.
and will leave promptly at 7:00 p.m.)

April 29

- 7:00 a.m. **Texas ACPG Breakfast**
Room A (upper level)
Moody Convention Center
- 7:30 a.m. **Registration**
Exhibit Hall/Moody Convention Center
- 8:00 a.m. **TOMA Annual Golf Tournament**
(Buses leave in front of Hotel Galvez)
- 8:00 a.m. **"Office Diagnosis of Temporo-Mandibular Joint (TMJ) Dysfunctions"**
John H. Harakal, D.O.
- 8:45 a.m. **"Dental Perspective of TMJ"**
Charles R. Holt, D.D.S.
- 9:30 a.m. **"Brain Mapping"**
Charles R. Biggs, D.O.
- 10:15 a.m. **Refreshment Break with Exhibitors**
- 11:00 a.m. **"Current & New Treatment of Peptic Ulcer Disease"**
Jay G. Beckwith, D.O.
- 11:00 a.m. to 1:00 p.m. **"Somato-Emotional Release"**
Exhibit Hall (OMT Room)
Russell Gamber, D.O.
Edward A. Luke, Jr., D.O.
- 11:30 a.m. **ATOMA Installation Luncheon**
Tremont House — Sam Houston Room
(Buses will leave in front of Hotel Galvez)
- 12:00 noon **"Dealing with the Hostile Patient"**
Irvin Schussler, D.O.
- 1:00 p.m. **AOA President-Elect's Luncheon**
Convention Hall-2 (upper level)
Moody Convention Center
- 2:30 p.m. **"Evaluation & Treatment of Hand Injuries"**
Peter B. Ajluni, D.O.
- 2:30 p.m. to 4:30 p.m. **"Risk Management Seminar — Part 2"**
Room C (upper level)/Convention Center
Mr. John H. Sortore
Joseph E. Wolpmann, D.O.
- 3:15 p.m. **"Current Topics in Immunology of Serus Otitis Media"**
Alvis Barrier, M.D.
- 4:00 p.m. to 5:00 p.m. **Visit Exhibits**
- 6:30 p.m. **President's Night Reception/Dinner/Dance**
Featuring "Ray Kent"
Convention Hall-1 (upper level)
Moody Convention Center

April 30

- 7:30 a.m. to 9:00 a.m. **Registration**
Exhibit Hall/Moody Convention Center
- 8:00 a.m. **Alumni Meetings**
TCOM — Room A&B (upper level)
KCOM — Room C (upper level)
Moody Convention Center
- 8:00 a.m. **ATOMA Galveston Historical Tour**
(Buses leave in front of Hotel Galvez)
- (ALL LECTURES WILL BE HELD BEHIND THE EXHIBIT HALL (lower level of the Moody Convention Center) UNLESS OTHERWISE NOTED)
- 8:00 a.m. **"Hormonal Replacement Therapy in the Young Castrate and the Mature Female"**
Peter Hickox, M.D.
- 9:00 a.m. **"What's New in Dermatology"**
Dudley W. Goetz, D.O.
- 10:00 a.m. **Refreshment Break with Exhibitors**
- 11:00 a.m. to 1:00 p.m. **"Noninvasive Vascular Testing in the Office"**
Don Peska, D.O.
- 12:00 noon **TOMA Board of Trustees' Luncheon**
East Parlor/Hotel Galvez
- 12:00 noon **ATOMA Board of Trustees' Luncheon**
Conference-A/Hotel Galvez
- 1:00 p.m. **TOMA Board of Trustees' Meeting**
West Parlor/Hotel Galvez
- 1:00 p.m. **ATOMA Board of Trustees' Meeting**
Conference-B/Hotel Galvez
- 2:00 p.m. **"Diabetes Update"**
Franklin B. Gluck, M.D.
- 2:45 p.m. **"Approach to Anemias"**
Mary Ann Skiba, D.O.
- 3:30 p.m. **Visit with Exhibitors**
- 4:00 p.m. to 5:30 p.m. **"Impedance Audiometry"**
Walter Ambrose, D.O.
- 6:30 p.m. **Fun Night Luau**
San Luis Hotel — Argosy Ballroom
(Buses leave in front of Hotel Galvez)



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89th ANNUAL CONVENTION

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Galveston Country Club
Friday, April 29, 1988



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Refund Policy

The REFUND POLICY for the 89th Annual Convention is as follows: All cancellations must be received in writing; no telephone cancellations will be accepted. A \$25.00 processing fee will be charged to all registrants who cancel. If cancellation is necessary, the following policy will apply:

More than 45 days prior to program, FULL REFUND
(less processing fee).

30-45 days prior to program, 50 percent of fees paid will
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15-30 days prior to program, 25 percent of fees paid will
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Less than 15 days prior to program, NO REFUND.

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Newsbriefs

ROBERT L. BOWLING LISTED AS OUTSTANDING

TOMA member Robert L. Bowling, D.O., was one of five Port Arthur residents to be listed in the 1987 Outstanding Young Men of America.

Dr. Bowling is a partner of Robert Faseler, D.O., in general and family practice. He graduated magna cum laude from Thomas Jefferson High School, and received his D.O. degree from TCOM. While at TCOM, Dr. Bowling was student microbiologist-immunologist of the year in 1982, won the Boehringer Ingelheim Internal Medicine Award in 1985 and was valedictorian of his TCOM class.

He is a member of TOMA, TOMA District XII, the American Osteopathic Association, and others. His father, TOMA member Robert A. Bowling, D.O., is a general practitioner and has practiced in Port Arthur for 20 years.

Our congratulations are extended to Dr. Bowling for this prestigious honor.

RECOMMENDATIONS FOR PREVENTION OF HIV TRANSMISSION IN HEALTHCARE SETTINGS

Texas Preventable Disease News reports that on August 21, 1987, the CDC released an MMWR supplement entitled "Recommendations for Prevention of HIV Transmission in Healthcare Settings." This document consolidates and updates previous recommendations. Copies of the supplement (MMWR Vol. 36, Supplement No. 2S) may be purchased from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402, telephone 202/783-3238, or from MMS Publications, CSPO Box 9120, Waltham, MA 02254, telephone 617-893-3800.

Why Be A TOMA Sustaining Member?

We have certainly reached a most decisive point in the history of the osteopathic profession in Texas whereby we are now well respected in the health care community. This is no small accomplishment when we take into account the relatively small size of TOMA in comparison to other provider groups throughout the state. We can, in light of our various achievements, look forward to the future with confidence, yet confidence must always be tinged with an acute awareness of the one constant factor in life, namely change.

In the past, our so-called "minority" status precipitated the extreme need for involvement and dedication, and contributions were diligently and generously made to TOMA to further the purpose of our goals — building upon and strengthening the proud heritage of the osteopathic profession and educating the public as to the uniqueness of our profession. Although there are still remnants of misinformation, we can truthfully say that today, it is universally admitted that D.O.s are viewed as competent physicians. Our past struggles have largely attributed to the sacrificial nature of the D.O., however, it is especially imperative at this time that we do not become too comfortable with the status we have finally achieved. To halt our ongoing public education campaigns at this time will undoubtedly adversely affect the progress of our profession, and thus, amalgamation could likely become the name of the game. Our uniqueness is our gift to the public and we simply cannot afford complacency to take root.

To help in keeping our philosophy alive, our identity must be kept intact and in full view at all times, which by so doing, TOMA's role of fostering the growth and flourishing of the profession in the State of Texas will continue. One way in which you, as members, can help is by either becoming a TOMA sustaining member or by continuing in this category.

Several years ago, categories of sustaining and sustaining plus memberships were created for the purpose of allowing members to contribute over and above their regular dues for the betterment of the profession and the association. In the past few years, the number of members maintaining sustaining membership has lessened. At this time, there are still over 100 who do support the association in this fashion.

We all realize that this is a time of economic restraint and physicians, as well as TOMA, are grappling with cost-conscious budgets. We sincerely hope that members will review their priorities in terms of financial support in this fashion. Sustaining members contribute \$100 over and above their normal membership dues, while sustaining plus members give \$150 over and above their dues. If you are able to continue as a sustaining member or

become a new one, you will be a motivating factor in our ability to continue the growth of our profession in Texas.

Being a sustaining member is not merely a matter of having the opportunity to attend a free party during our conventions, or acquiring a white hat, or other such perks. It is insurance that the future of the profession will be filled with yet more successes in the face of, as mentioned above, change — the one constant factor in life. Your help will channel our efforts to maintain a secure future of growth, and most important of all, unity. Contributions are put to good use to ensure all of the aforementioned.

We offer our sincere thanks to all those members who have in the past and/or are presently supporting the association through sustaining and sustaining plus memberships. Our gratitude cannot be overemphasized and we trust you will be able to continue to support TOMA in this most generous way.

It's never too late to become a sustaining or sustaining plus member. If you have already paid regular membership dues and wish to change your status, simply send in your check for \$100 or \$150. Likewise, if you have not already paid your dues and wish to become a sustainer, add either \$100 or \$150 to your membership dues check.

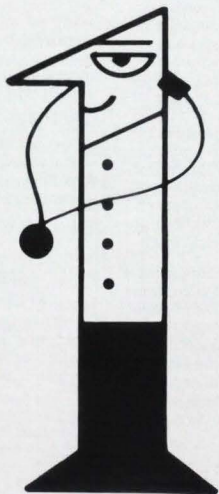
At TOMA, we are fiercely dedicated in our commitment not to merely survive, but to plant our roots deep and strong, thereby branching out in all directions in the years to come. With your help, the osteopathic profession in Texas will have the ability to withstand any adverse winds which may blow our way. We have it within ourselves to be second to none.

Newsbrief

ER WARS

In an effort to protect physicians from ER violence, the VA hospital in West Los Angeles began utilizing metal detectors in order to check patients who might be carrying weapons. This stance was implemented after a resident physician was attacked by an ER patient brandishing a knife in 1987. During the first seven months the detectors were used, 281 illegal weapons and approximately 10,000 potential weapons (such as ice picks) were discovered.

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Texas Monthly Will Feature Ad Promoting Osteopathic Physicians



The February issue of *Texas Monthly* magazine is sure to be a big hit with the osteopathic community in Texas. A full-page color ad will appear, touting the benefits of D.O. family physicians and specialists. A vast amount of positive exposure is anticipated due to the fact that this particular issue is the special 15th anniversary issue of

the magazine. As such, it is expected to be a collector's item and to have an average shelf life of six to nine months.

Additionally, the issue will have a projected circulation of 295,000 plus, which exceeds the Texas circulation of such magazines as *Time* and *Newsweek*. Distribution of the magazine is 87 percent by subscription and 13 percent by newsstand. *Texas Monthly* has won four National Magazine awards and has been a finalist for the prestigious award 18 other times. According to its readership profile, it "... is a white-hot giant in the Lone Star State. Each and every issue of *Texas Monthly* is read by more than one million Texans. . .".

Those who do not subscribe are urged to purchase a copy which will go on sale the last week of January. We guarantee you will be pleasantly surprised with this quality ad.

As you are probably aware, the national Auxiliary recently placed several full-page ads in the national magazines, *The Saturday Evening Post*, *McCall's* and the United Airlines flight magazines. These ads promoting the osteopathic physician were of the highest quality and were developed by an advertising agency employed by Normandy Osteopathic Hospital in St. Louis. The quality content and professional appearance of these ads pleased everyone.

ATOMA President Marilyn Mohney, during various district visitations, spoke enthusiastically of these ads. After locating a prestigious magazine with the highest circulation, namely *Texas Monthly*, and, when it was discovered that its February issue was an anniversary edition, District XV, for one, felt very strongly about attempting to place an ad in that particular issue. Help in funding this project came from TOMA Districts II,

V, VI and XV, as well as Fort Worth Osteopathic Medical Center.

The ad will be almost identical to the one which appeared in the October 1987 issue of *The Saturday Evening Post*, except for copy change to read that additional information on osteopathic medicine can be obtained from TOMA.

The exposure generated by this ad should prove to be enormous. We urge you to look for the February 1988 special anniversary issue of *Texas Monthly*, either with your subscription or on the newsstand.

Newsbrief

AMERICAN LIVER FOUNDATION SPOTLIGHTING HEMOCHROMATOSIS

The American Liver Foundation is endeavoring to carry out an educational drive in regards to hemochromatosis, a common genetic disorder which is often misdiagnosed.

The disease is hard to diagnose because patients' symptoms vary so greatly, however it is much more common than previously thought, affecting approximately one in 300 to 400 individuals. It affects the body's capacity to use iron and excess iron in the blood can damage almost any organ. Those afflicted with the disease can lead a normal life, if treated in time.

In order to increase awareness of this often misdiagnosed disease, a pamphlet on hemochromatosis, also called "iron overload disease", is available by sending a stamped, self addressed envelope to the American Liver Foundation, Cedar Grove, New Jersey 07009.

WALL CHART LISTS CHEMOTHERAPEUTIC DRUG DATA

The American Cancer Society has created a wall chart, "Cancer Chemotherapeutic Agents", designed for health professionals. The chart lists comprehensive data regarding approximately 41 chemotherapeutic drugs, and is intended to serve as a general guide to some of the available growth-inhibiting medications for treating cancer. The charts can be obtained through local offices of the American Cancer Society.

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PMIC Liquidation Update

On December 17, 1987, Jeff Robenalt was named as deputy receiver in Texas for the PMIC liquidation, with James T. Odiorne named as the receiver. This was done after the order was filed with the court by Mr. Stringer of the Texas Attorney General's Office. The order filed was a temporary restraining order which resulted in the naming of the receivers.

On December 28, an agreed temporary injunction was entered in the court at which time PMIC was declared as an "impaired" company, thus allowing the wheels to begin turning to activate the guaranty fund. Proof of Claim forms were mailed to all individuals in January. These steps were necessary because Texas law requires that a receiver be named in Texas, even though PMIC had already had one named in Missouri.

It should be noted that the Guaranty Division of the Texas Insurance Department, as well as PMIC in receivership, are required to mail the forms to those affected, thus resulting in the receipt of two sets of forms. It should also be noted that BOTH SETS MUST BE RETURNED as indicated. Failure to return both sets may result in a major foul up.

There are two kinds of Proof of Claim forms; one being designed for policyholders, and the other for surplus note holders. It should be emphasized that if you have received the surplus note holder Proof of Claim form, (even if you have no claims to report on the policyholder Proof of Claim form), it is important that you complete and return it. If this is not done, you will not be able to recoup any of your money.

The law requires that Proof of Claim forms be mailed, among others, to the following: 1) ALL policyholders during PMIC's 29 years of existence (1958 to May, 1986), regardless of your present situation. In other words, anyone ever insured by PMIC will be receiving something; 2) All surplus note holders whose notes have not been returned through the years or transferred to PMICRRG; 3) Policyholder defendant on open claims, and the attorney; and 4) Claimant on open claims, and the attorney.

Individuals have been sent separate letters for the category under which their situation applies.

It is important to note that October 9, 1988 has been established as the bar date, which means the last day any PMIC claim will be accepted. Physicians might wish to consider holding onto their Proof of Claim forms for a while, IF they don't know of any claims at this time, in the event a claim does arise between now and the bar date. However, we would like to re-emphasize the point that if a Proof of Claim form for surplus note holders

is received, it would be wise to complete this and return it immediately.

It appears that defense costs will be paid retrospectively, but are included in the \$100,000 limit of the guaranty fund. There are 150 known claims at this time in Texas.

Debra Whitfield has been appointed as legal counsel to the receiver and deputy receiver. Her phone number in Austin is 512/836-7251, extension 44.

Newsbriefs

AND ANOTHER LIABILITY THREAT SURFACES

An appellate court in Maryland has ruled that a physician's contractual duty to his patients is not solely limited to providing care. In this case, the patient's employer required that medical absences be explained in writing, signed by a physician and submitted within a specific time frame. The patient contended that because the surgeon in question did not file the insurance form within the specified period, although he was asked to, the patient thus lost his job.

The court ruled that because such forms usually require information in possession of the treating physician, a patient harmed by a physician's failure to complete them in a timely manner has the right to sue.

TSBME STATISTICS SHOW JUMP IN PHYSICIAN COMPLAINTS

The number of complaints against Texas physicians in 1987 jumped 32 percent over the number filed with the TSBME in 1986. The rise is largely attributed to a new law requiring hospitals and medical peer review groups to report disciplinary actions taken against physicians, as well as the toll-free hot line created for citizens wishing to report complaints.

The board's statistics reveal 306 complaints between September 1 and November 20, 1987, a 32 percent increase over the 232 complaints lodged during the same time frame in 1986.

Statistics also show that between August 31 and November 24, 1987, 237 calls were received on the toll-free hot line. However, only 18 of the 237 citizens wished to file a complaint, with 78 percent merely asking for information about a physician.

The toll-free number is 1-800-248-4062, and 467-8142 for those in the Austin area.

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* Commissioner's Disability Table

† U.S. Government Housing and Home Finance Agency

‡ Life Insurance Marketing and Research Association (LIMRA)

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ATOMA News

By Jackie Sharp
ATOMA District II

One of our objectives as Auxiliary members is to support the educational activities of the osteopathic profession and, to this end, District II contributes annually to the National Osteopathic College Scholarships sponsored by the AAOA. This year, the Scholarships Awards Commission met in Chicago to evaluate 115 applications.

A total of 29 recipients were selected, representing the 15 osteopathic schools. Significantly, three of the students are from TCOM. Requirements for the scholarships include high scholastic achievement, with a standing in the top 20 percent of the freshman class. The fortunate and deserving TCOM students receiving \$2,000 each, were: Stephen E. Hatfield, Commie Lawrence Hisey and Elizabeth A. Owen. Incidentally, pictures of the three were run in the January 1988 issue of the *Texas DO*.

Stephen, from Mesa, Arizona, and his wife, Lisa, are expecting their first child as this issue goes to press. Commie and his wife, Donna, have a three-year-old son, Benjamin, and are planning to return to their hometown of Gonzalez, Texas, to set up practice. Elizabeth, of Scottsdale, Arizona, was the top student last year in neurobiology and one of the top students in physiology.

The Auxiliary is very proud of these students' achievements, and happy to have had a part in helping them meet one of the scholarship requirements — a personal interview. Taking time from demanding schedules is never easy, but contributing their efforts were Dr. and Mrs. Fred (Chris) Brenner, Dr. and Mrs. Chris (Karen) Hull and Dr. and Mrs. Philip (Sherry) Reese. Mrs. David (Carolyn) Bilyea deserves a special note of appreciation for her involvement.

Once again, we are going to participate in cancer screening for the American Cancer Society by manning telephones. Twenty phones will be covered February 22 from 6:00 to 12:00 midnight. Contact our President Marilyn Richards, for more information on this important event.

A February activity already took place on February 4 at the home of Sherry Reese. A "get acquainted" welcome coffee for new members was hosted by Sherry, and proved to be a lovely event, indeed.

Other District II members have been generously donating their time and energy to making the Wintercrest Ball the best ever this year. Myra Schussler and Lynn Ranelle, Co-Chairmen, arranged the event for March 5 at the Hyatt. The band will be the Party Dolls and, once again, big spenders will have the opportunity to test their skill and luck at the ever popular casino tables. A Chinese Auction is being planned and some fabulous items will be available upon which to bid.

Proceeds of the Ball will be equally divided among local charities and osteopathic scholarships. The Auxiliary has a growing reputation for its support of the community, and this year we will be supporting Northside High School, the Epilepsy Association summer camp program, the ARC summer camp program, Gill Children's Services, Women's Haven, and A Wish With Wings.

Not only are the causes so very worthwhile, but the Ball is one of the most enjoyable social events of the year — so don't miss it!

Newsbrief

DR. T. EUGENE ZACHARY APPOINTED TO MEDICAL ADVISORY COMMITTEE

T. Eugene Zachary, D.O., Vice President for Academic Affairs and Dean at Texas College of Osteopathic Medicine, has been appointed as a member of the Medical Advisory Committee to the Special Committee on Post-Secondary Medical, Dental and Allied Health Education. Physicians serving on the eight-member Medical Advisory Committee were appointed by Jamie Clements and announced by Lieutenant Governor Bill Hobby.

"I am delighted that these outstanding physicians have agreed to serve on our Medical Advisory Committee," said Jamie Clements, chairman of the Special

Committee on Post-Secondary Medical, Dental and Allied Health Education."

The advisory committee will be providing input on the future of medical education in Texas. According to Hobby, "This advisory group will provide very important information to Jamie Clements and the special committee as they make recommendations to improve medical education."

Clements will appoint an advisory committee on dental education and one on allied health education in the near future.

Congratulations to Dr. Zachary!

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IN MEMORIAM

V. A. Kelley, D.O.

V. A. Kelley, D.O., of Waco, passed away December 4 in a Waco hospital. He was 94 years of age. Services were held at Connally-Compton West Waco Drive Funeral Home Chapel, with graveside services at Santa Anna Cemetery in Santa Anna.

Dr. Kelley was the son of William and Mollie Grady Kelley, early settlers of Santa Anna. His father helped organize the first bank in that town and then opened a mercantile store. Dr. Kelley worked in the mercantile and cotton business with his father until 1917, at which time he enlisted in the Air Service Signal Corps at Fort Sam Houston. He entered the School of Military Aeronautics at the University of Texas for pilot training, where he received his commission as second lieutenant.

Dr. Kelley then went on to advanced training at the instructor's school at Love Field in Dallas, where he received his instructor's license. After World War I, he entered Kirksville College of Osteopathic Medicine, receiving his D.O. degree in 1925.

A TOMA member since 1934, Dr. Kelley was honored with life membership in 1985. He moved to Waco where he practiced for 60 years, before his retirement in 1985.

He was also a member of TOMA District V; life member of the AOA; and member of the American Legion Post 121. Dr. Kelley was a Mason and member of the Knights Templar and a founding member of the Order of Daedalians, the national fraternity of military pilots.

Survivors include a daughter, Dr. Elizabeth Antilla of San Juan, Puerto Rico; a son, Dr. Virgil Kelley of McGregor; a sister, Mrs. Hines H. (Thelma) Baker of Houston; six grandchildren; and 10 great-grandchildren.

In lieu of usual remembrances, the family has requested memorials to the Heart of Texas Council of Boy Scouts of America, or the planting of a pecan or oak tree in the city of Waco for the enjoyment of future generations.

TOMA extends its condolences to the family.

William E. Button, D.O.

William E. Button, D.O., an active FWOMC staff member in orthopedic surgery, died November 9, 1987, in his Arlington home. He was 56 years of age. Memorial services took place at Moore Funeral Home in Arlington.

A 1956 graduate of Des Moines College of Osteopathic Medicine, Dr. Button interned at Mineral Area Osteopathic Hospital in Farmington, Missouri, from 1956-57. He took an orthopedic surgery residency at Normandy Osteopathic Hospital, Missouri, and the Kansas City College of Osteopathic Medicine. He was certified in orthopedic surgery. Dr. Button practiced in St. Louis, Missouri, before relocating to Texas in late 1981, at which time he became a TOMA member.

In addition to TOMA membership, Dr. Button was

also a member of the AOA, AOAQ, a FACOS and FAOAO, and a past president of the American Osteopathic Academy of Orthopedics. He had served as chairman of the department of orthopedics at Dallas/Fort Worth Medical Center in Grand Prairie, as well as director of the residency training program.

Survivors include his wife, Jennie Button, D.O., of Arlington; two sons, William Allen Button of St. Louis, Missouri, and John Daniel Button of Arlington; one daughter, Debra Marie Button of Arlington; his mother, Icel Marie Butts of Overland Park, Kansas; and one brother, Jack Button of Overland Park.

TOMA expresses its deepest sympathy to the family of Dr. Button.

Jason Kirk Liverman

Jason Kirk Liverman, son of TOMA member Raymond E. Liverman, D.O., of Arlington, passed away November 19, 1987 due to injuries received in an automobile accident. He was 18 years of age.

Funeral services were held at Moore Funeral Home in Arlington, with burial at Moore Memorial Gardens in Arlington.

Mr. Liverman was born in Dallas and moved to Arlington in 1978. He attended Pope Elementary School and graduated from Lamar High School in Arlington in 1987. He was a student at Southwest Texas State University in San Marcos, where he was preparing for

study in pre-medicine. Mr. Liverman was a pledge to the fraternity of Phi Delta Theta.

Survivors include his parents, Dr. and Mrs. R.E. Liverman, Sr. of Arlington, Dr. Raymond E. Liverman, Jr., of Farmers Branch, and John Kevin Liverman, Jeffrey Kyle Liverman, and his identical twin, Jeron Karl Liverman, all of Arlington; one sister, Cameo Cartwright of Kansas City, Missouri; his grandmother, Florence Lorene Mansel of Fort Worth; and his step-grandfather, Plato Maness of Fort Worth.

TOMA extends its deepest sympathies to the family of Jason Liverman.



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Smithsonian Institution Seeking Artifacts of Early Osteopathic Beginnings

The American Osteopathic Hospital Association and the AOA have been contacted by the Smithsonian Institution in its efforts to secure items of historic interest in osteopathic medicine and hospitals. Plans for a renovation of the medical wing of the National Museum of American History began about a year ago. The plan is to include a section chronicling the development of osteopathic medicine and its hospitals. The osteopathic community is urged to participate in this search for osteopathic artifacts.

At this time, an inventory is being built as to what is in the field. Personalized stories of osteopathic physicians, scenes of rural practices, or physical artifacts, such as an early manipulative therapy table, for example, would all be appropriate. In general, any artifacts preserving the atmosphere of the beginnings of osteopathic hospitals would be useful.

Once the list is complete, the AOHA will submit it to the AOA and the Smithsonian for their review.

Your efforts in contributing to this exhibit and bringing increased national exposure to osteopathic medicine and its hospitals is most appreciated. The inclusion of osteopathic history into the Smithsonian's Museum of American History should prove to be an enlightening and interesting addition, while raising our visibility as an association of hospitals, says the AOHA.

Mr. Ray Stokes, Curator of Library Special Collections, Texas College of Osteopathic Medicine, has offered his services as a middle-man for the search in Texas. Questions can be routed through Mr. Stokes, who will then send the completed Texas list on to the AOHA. At this point, as mentioned above, the AOHA will submit the list of the AOA and the Smithsonian. Stokes can be contacted at the TCOM Library, 3516 Camp Bowie Boulevard, Fort Worth, 76107 or by calling 817/735-2593.

Individuals with questions outside of Texas may obtain further information from either Martin A. Wall, AOHA Vice President, or Gene Ripper, AOHA Staff Associate, Research and Analysis, by writing the AOHA, 1454 Duke Street, Alexandria, Virginia 22314, or by phoning 703/684-7700.

The foundation of the Smithsonian Institution was provided for through the legacy of James Smithson (1765-1829), a British mineralogist and chemist. Smithson, born in France and educated at the University of Oxford, became a fellow of the Royal Society in 1787. He published 18 papers in the *Annals of*

Philosophy and read 28 papers on scientific subjects before the Royal Society.

The funds left by Smithson led to the founding of the institution in 1846 by act of Congress, under the terms of the bequest of Smithson, that it be "an establishment for the increase and diffusion of knowledge among men." Located in Washington, D.C., as an independent agency of the U.S. government, it is a center for basic scientific research as well as the largest museum complex in the world.

To accomplish the objectives as set forth by Smithson, the institution maintains collections of scientific and artistic interest, sponsors scientific research, publishes books and supports an international exchange of publications. Most of the different units of the institution are located in Washington, D.C.

The library of the institution, which includes the Smithsonian deposit in the Library of Congress, contains a wealth of volumes, consisting mainly of scientific publications.

We encourage individuals to begin their search for such artifacts. Exposure in this prestigious facility will prove to be a great boon to our profession and, in addition, focus national attention on the osteopathic profession to the public's advantage.

Newsbrief

FLORIDA TIGHTENS RULES ON INSURANCE ADS

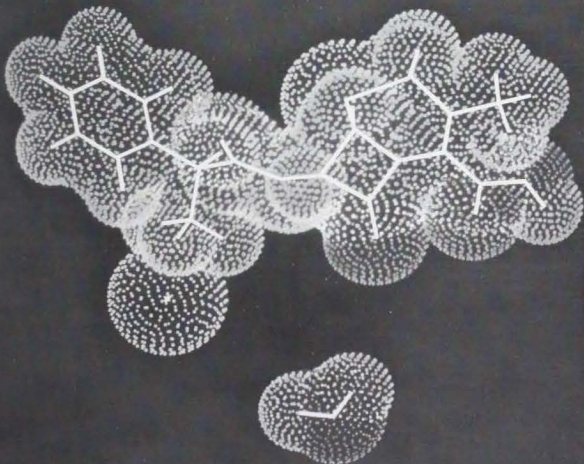
A new "truth in advertising" rule has been announced by Florida's insurance commissioner, pertinent to possible misleading television ads where celebrities tout the benefits of Medicare supplemental insurance and/or life insurance. Under the new rule, paid spokesmen are required to be licensed as insurance agents if policy benefits are discussed, and furthermore, spokesmen must reveal that they are being paid. A provision of the rule goes even further, whereby carriers must explain any restrictions that are applicable to the benefits as promoted in their ads.

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News from Dallas Family Hospital

Dallas Family Hospital kicked off 1988 with a new monthly community lecture series entitled "Health Talks". The program, presented by the medical staff as a public service, is designed to educate the public on a variety of health related topics that could improve overall health and well being.

Included in the lecture series is a complimentary Health Check Card, which entitles the bearer of the card to a variety of free monthly diagnostic health screens, which include diabetes, cholesterol and anemia.

Lewis M. Pincus, D.O., internal medicine specialist, kicked off the program in January by speaking on health tips—what to know in order to start a healthy year. His talk included lowering cholesterol, exercise and diet, and "Heart Healthy" eating.

February's lecture will be covering "Recognizing Signs and Symptoms of Heart Attacks", and will be held Tuesday, February 23, from 12 noon to 1 p.m.

The lectures are held in the Dallas Family Hospital Auditorium in the Medical Education Building. Free lunch is provided.

Upcoming topics include common foot problems, dealing with allergies, and ulcers—how they relate to diet and stress.

Dallas Family Hospital, located at 2929 South Hampton Road in Dallas, is a 104-bed acute care facility staffed by a complete team of healthcare professionals, and owned by Universal Health Services. For more information and to make a reservation for "Health Talks", contact the Community Relations Department at 214/330-4611, extension 606.

In other news, Joseph La Manna, D.O., Chief of Staff at Dallas Family Hospital, recently announced the election of Chris V. Semos, Dallas County Commissioner, to the hospital's Board of Governors. Semos is serving his second term as a member of Commissioners Court of Dallas County. He was re-elected in November 1986 as County Commissioner, District 4.

According to Semos, "Dallas Family Hospital is an important part of the Dallas Medical Community and I am very honored to have been asked to serve as a member of its board."

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Amarillo Hospital First in Texas to Allow Chiropractors on Staff

Family Hospital Center in Amarillo has become the first hospital in Texas to allow chiropractors on its medical staff.

At a recent meeting, the hospital's board of trustees approved courtesy privileges for chiropractors. During the meeting, 11 Amarillo area chiropractors had their staff applications approved by the board.

According to the Texas Chiropractic and the American Chiropractic Associations, Family Hospital is the first hospital in Texas, that they are aware of, to approve hospital privileges for chiropractors.

Family Hospital Administrator Rodney Bailey stated, "What this will mean is that chiropractors can follow the hospital care of their patients more closely." However, Bailey added that with courtesy privileges, chiropractors will not be able to directly admit patients into the hospital. "That must still be done by a physician with active privileges," he said. Active physicians at the hospital

are D.O.s and M.D.s, while other practitioners with courtesy privileges include dentists and podiatrists.

According to Bailey, the addition of chiropractors was not precipitated by the recent court action by the national chiropractic organization against the AMA, with the chiropractors contending that the AMA was attempting to thwart the chiropractic profession. This scenario came to a head on September 25, 1987, at which time U.S. District Judge Susan Getzendanner entered a permanent injunction ordering the AMA to stop "restricting, regulating, or impeding" its 275,000 member physicians or the hospitals where they work from associating with chiropractors.

On the national scene, similar hospital action has taken place in the states of Rhode Island, Michigan, Arizona, Washington, Missouri, Illinois, Colorado and New York.

With this recent court action in favor of the chiropractors, it is likely that other hospitals will be adding chiropractors to their staffs. ■

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Drs. John Boyd & Alfred Johnson Appointed to Texas State Board of Medical Examiners

John H. Boyd, D.O., and Alfred R. Johnson D.O., have been appointed by Governor Bill Clements to serve on the Texas State Board of Medical Examiners. They face Senate confirmation during the next legislative session.

John Boyd, D.O., of Eden, replaces John Burnett, D.O., and was appointed to serve through April 13, 1993. He is a longtime TOMA member and served as TOMA president from 1973-74.

A 1955 graduate of Kirksville College of Osteopathic Medicine, he is in general practice in Eden and is an Aviation Medical Examiner. Some of his numerous memberships and activities include TOMA District IV; Eden City Health Officer; board member of Concho County Hospital District; past president of the Texas Institute for Medical Assessment; AOA; Texas Medical Foundation; Civil Aviation Medical Association, of which he just finished two years as president; member from 1956-72 of the TOMA House of Delegates; vice speaker of TOMA House of Delegates from 1965-72; and member of the Aerospace Medical Association.

Alfred R. Johnson, D.O., who replaces Joel Holliday, D.O., has been appointed to serve through April 13, 1993

also. A 1974 graduate of Kansas City College of Osteopathic Medicine, Dr. Johnson interned at Oklahoma Osteopathic Hospital and completed a residency in internal medicine at Osteopathic General Hospital. He also participated in a one-year fellowship program in clinical ecology through Environmental Health Center, Dallas.

A fellow of the American Academy of Environmental Medicine, Dr. Johnson holds memberships in TOMA; TOMA District V; American Academy of Osteopathy; American Academy of Otolaryngic Allergy; American College of Preventive Medicine; AOA; American Public Health Association; Human Ecology Action League, Pan American Allergy Society; Sierra Club, American College of Allergists and the Texas Medical Foundation.

Dr. Johnson, who practices in Dallas, is board eligible in internal medicine and is also involved in environmental medicine.

It is anticipated that a new president of the TSBME will be elected during its January meeting.

TOMA extends its congratulations to Drs. Boyd and Johnson.

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Texas ACGP Update

By Joseph Montgomery-Davis, D.O.
Texas ACGP Editor

The Texas ACGP dues statement for 1988 will include a request for candidates for the annual GP of the Year award.

Only Texas ACGP members in good standing can submit nominees for the General Practitioner of the Year for 1988. The proposed nominee must be offered by a Texas ACGP member and the nominee shall possess the following requirements: 1) must be a member of the National ACGP. (Texas recipients are automatically forwarded to the National ACGP Awards Committee for national consideration); 2) the nominee can be shown to have made outstanding contributions to his profession and community, depictive of the unselfish devotion in serving others; 3) the nominee must have been in active general practice for at least the past 15 years, or the past 10 years plus an internship or residency in general practice; 4) the name and completed supportive information shall be forwarded to the secretary of the Texas ACGP for consideration by the Awards Committee.

The nominators should supply as much detail as possible for the consideration of their nominee. The nominator should supply at least one (two preferred) black and white, (no color photos, please) four by six or five by seven photos of the nominee, if at all possible.

Each month we will try to impart some information regarding problem areas in the proper coding of health care claim forms. This month we will discuss office visits plus minor surgery and an acceptable diagnoses for Medicare coverage of injectables.

Office Visits Plus Minor Surgery

Medicaid and Medicare will both pay for an office visit plus a surgical procedure under certain conditions. This information is found under *Surgery Guidelines* (12) in the CPT-4 manual, and the appropriate circumstances are indicated by a star (*) following the procedure code number. The diagnoses on the claim form should support the submission of both the medical and surgical codes. *Starred (*) Procedures or Items:* Certain relatively small surgical services involve a readily identifiable surgical procedure but include variable preoperative and postoperative services (e.g., incision and drainage of an abscess, injection of a tendon sheath, manipulation of a joint under anesthesia, dilation of the urethra, etc.). Because of the indefinite pre-and postoperative services, the usual "package" concept for surgical services (see above) cannot be applied. Such procedures are identified by a star (*) following the procedure code number.

When a star (*) follows a surgical procedure code number, the following rules apply: A) The service as listed includes the surgical procedure only. Associated pre-and

postoperative services are not included in the services listed. B) Preoperative services are considered as one of the following: 1) when the starred (*) procedure is carried out at the time of an initial visit (new patient) and this procedure constitutes the major service at that visit, procedure number 99025 is listed in lieu of the usual initial visit as an additional service. 2) When the starred (*) procedure is carried out at the time of an initial or other visit involving significant identifiable services (e.g., removal of a small skin lesion at the time of a comprehensive history and physical examination), the appropriate visit is listed in addition to the starred (*) procedure and its follow-up care. 3) When the starred (*) procedure is carried out at the time of a follow-up (established patient) visit and this procedure constitutes the major service at that visit, the service visit is usually not added. 4) When the starred (*) procedure requires hospitalization, an appropriate hospital visit is listed in addition to the starred (*) procedure and its follow-up care. C) All postoperative care is added on as a service-by-service basis (e.g., office or hospital visit, cast change, etc.). D) Complications are added on a service-by-service basis (as with all surgical procedures).

Medicare Acceptable Diagnosis For Covered Injectables

The new Medicare Part B Handbook for physicians has a supplement entitled Specialty Coding. Specifically, on page 49 of the supplement under the title Limited Coverage Procedures, are a list of injections and diagnoses for which the injectables are covered by Medicare.

If a physician gets a claim form back from Medicare stating that the injectable was not paid because it was inappropriate for the diagnosis, the physician is encouraged to consult this section of the Medicare Part B Handbook.

In closing, the Texas ACGP and TOMA are important resources for information to assist Texas osteopathic physicians with fiscal intermediary problems. We are here to serve our membership.



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THE CONSEQUENCES OF 'GOING BARE'

By Eli P. Bernzweig, J.D.

As mounting malpractice payouts and the costs of investigating and defending claims give rise to higher malpractice premiums through the nation, a certain number of physicians (TOMA physicians included) inevitably question the necessity for such insurance altogether, claiming to see little, if any, economic advantage to continuing their present coverage. Physicians who decide to cancel or not renew their malpractice policies ("going bare," in insurance jargon) generally believe that they could do just as well by setting aside funds for their own legal defense in case they ever get sued — an event they seldom see as likely.

The decision to go bare can have a number of significant consequences, however, consequences that tend to be overlooked or dismissed as unimportant by premium-conscious physicians. Let's take a closer look at some of these consequences.

The fundamental moral issue

As all physicians know, the potential for causing bodily harm is an ever-present reality in the practice of medicine. Even the best of physicians and surgeons make mistakes and occasionally cause injury to their patients. Thus, assuming malpractice insurance is available and not prohibitively priced, the physician who practices without it demonstrates a flagrant disregard for the plight of those patients who might suffer serious injury (and accompanying financial loss) as a result of the physician's negligence. In this respect, going bare is as immoral and as irresponsible an act as driving one's automobile without insurance.

"I'll take my chances on being sued."

There's no way of predicting who will and who won't be sued within any given time period but, based on nationwide claims figures, virtually every medical practitioner in Texas today can expect to be sued at least once during his or her professional career. Surgeons and physicians in certain high-risk specialties face an even greater risk of being sued. Thus, the osteopathic physician who proudly proclaims, "I've been in practice for over 20 years and haven't had even a hint of a claim during that entire period," merely demonstrates an ignorance of the statistical probabilities, no matter how carefully he or she practices. As one malpractice defense attorney put it, "If you like skydiving, skating on thin ice, and riding the rapids in an old inner tube, then going bare is for you." Before deciding to go bare, therefore, better ask yourself just how much of a gambler you really are.

"Without insurance you're no longer a target for a plaintiff's attorney."

The fallacy of this argument is the unfounded assumption that a plaintiff's attorney will actually know in advance that a particular physician is uninsured and will, for that reason alone, refrain from suing him. In point of fact, however, all competent malpractice lawyers make it a routine practice to sue everyone even remotely involved with a patient's care. Indeed, it may be legal malpractice to do otherwise. Through interrogatories posed to the various defendants, a plaintiff's lawyer may eventually learn that a particular defendant is uninsured; but by then the uninsured doctor has already had to engage legal counsel and begin incurring the substantial costs usually associated with defending malpractice cases.

In any event, merely because a doctor chooses to go bare does not signify he is without income or other assets to satisfy a malpractice award. Certainly, lack of insurance alone will not deter and experienced malpractice attorney from pressing onward against a doctor, especially if he thinks he has a provable case with the potential for obtaining a substantial judgment.

"I can self-insure and handle all the costs myself."

Not likely. Most doctors don't actually self-insure, which calls for putting money aside in a separate fund to handle possible future claims. They simply go without insurance. To begin with, there's no tax advantage to actually setting aside funds for this purpose since the IRS does not recognize self-insurance as a deductible business expense.

More importantly, bare doctors tend to overlook the fact that the cost of defending a malpractice suit will generally far exceed the cost of malpractice coverage. According to Insurance Services Office statistics, the average cost of incurred malpractice claims in Texas in 1984 — that is, claims where some payment was made to the plaintiff, together with all associated defense costs — was a whopping \$190,638. *Defense costs alone averaged \$76,000 per claim.* And you can be sure that those claim costs have not gone down since 1984.

Even assuming a physician could handle an outlay of that magnitude, what happens when lightning strikes more than once? Anyone who doesn't think that's a likely prospect should read a sampling of applications for insurance received by any current medical malpractice carrier. ►

Costs of appeals and new trials

There are still other cost considerations. Let's assume a physician were to luck out and successfully defend a malpractice suit in a jury trial. That's by no means the end of the matter. Most doctors who go bare forget that even if they win (i.e., successfully defend) the case against them in the trial court, the plaintiff can still appeal, and if he does, the uninsured physician will have to pay still more attorney's fees and court costs to handle the appeal — perhaps as much as was incurred during the original trial. What's more, if the appellate court determines that the case should be retried, the hapless doctor is right back at Square One, with the costs of an expensive trial to bear all over again.

The bare defendant who decides it isn't worth it at that point faces an even grimmer prospect; the plaintiff can get a default judgment (which will include not only damages, but all legal fees and court costs) and will hound the doctor for payment until the judgment is satisfied. Bankruptcy might be a way out, but an individual can declare bankruptcy only once every six years, so if a physician were hit with another malpractice judgment within six years of declaring bankruptcy, he'd be sharing his earnings with the successful plaintiff for at least the remainder of the six year period.

"I'll give my assets to my spouse so the plaintiff can't get at them even if he wins."

As well and good, but there are limitations even in this circumstance. First, transfers of this nature must be made with painstaking care to assure compliance with applicable federal and state tax laws. Second, timing is very critical. Any such transfer must be made *before* any malpractice action has been initiated against the uninsured doctor, since any attempt to shelter assets *after* a claim has been formally initiated would be viewed as a fraud against the doctor's creditors, and certain to be nullified by the courts.

Putting one's assets in an irrevocable trust for one's spouse is legally permissible, but once the assets are gone, they're gone for good, and the uninsured doctor can't later change the terms of the trust or get the assets back if he has a change of heart. Bear in mind that not all marriages are strong and lasting, and a doctor's wife who is made the beneficiary of all of her husband's assets in this manner has full legal authority to use them as she wishes or give them to anyone she wants, in addition to disposing of them entirely by her will. Not exactly a pleasant prospect for the physician in a shaky marriage whose sole objective is to avoid paying the claims of possible future malpractice judgment creditors.

Hospital privileges may be at risk

One of the strong incentives not to go bare is that nearly all hospitals in the United States now *require* doctors to maintain adequate levels of malpractice coverage before being granted staff privileges. Preliminary inquiry indicates this is as true in Texas as it is in other states.

Thus, the osteopathic physician who chooses to go bare may be seriously jeopardizing the privilege of practicing medicine in all but the most limited manner.

Being shunned by colleagues

An uninsured doctor presents a major risk to fellow physicians who are insured, especially where covering arrangements, referrals or consultations are involved. When a bad result occurs under one of these circumstances, it's a safe bet that both the insured and the uninsured doctor will be sued. From that point on, however, the uninsured doctor will undoubtedly go to great pains to place legal blame for the patient's injury on his insured colleague; to do otherwise would be harmful to his personal financial interests. Recognizing this propensity, many malpractice insurers advise their policyholders to exercise great caution before making or accepting referrals from, or enter into covering or consultation arrangements with, uninsured doctors.

Emotional issues to consider

Finally, there is the emotional cost of going bare. The doctor who has decided to remain uninsured is in for a sobering and financially costly experience not likely to be soon forgotten. From the moment papers are served in the lawsuit, an ongoing series of decisions will have to be made, decisions that would normally be made by a malpractice policyholder's insurance carrier. What lawyer should be hired, and what is a reasonable legal fee to pay? Should the case go to trial or be settled, and if settled, at what figure? Should an appeal be filed? Clearly, every one of these decisions has a price tag associated with it.

Time spent away for the doctor's normal duties will be far beyond anything previously imagined. There will be endless meetings with his lawyer, followed by pre-trial depositions, the preparing of responses to interrogatories, rehearsing for cross examination, and then the trial itself. True, the same amount of time would be spent even if the doctor were insured, but the knowledge that a wrong tactical move could mean possible financial ruin will play heavily upon the doctor's mind and emotions during this period.

Treating patients and worrying about the outcome of a lawsuit are not exactly complimentary activities, as the uninsured doctor will soon learn, and the loss of income during the period prior to trial will be far greater than anticipated. From the psychological standpoint, therefore, the uninsured doctor is in for a rough time.

In conclusion, going bare is a calculated risk that few medical professionals are mentally, emotionally or financially equipped to take, even though they may believe otherwise. TOMA physicians who may be contemplating going bare should carefully consider the many negative ramifications of such a decision before taking the plunge. ■

ELIP. BERNZWEIG, J.D., is Vice President in charge of loss control, Insurance Equities Corporation (IEC), of Palo Alto, California. IEC is the manager of TOMA's new professional liability insurance program.

Prescription Non-Compliance a Big Problem

In an annual poll initiated by Schering Laboratories, whereby 2,000 patients were surveyed, prescription non-compliance was deemed a serious problem. The results revealed that while only seven percent of those questioned never got their initial prescriptions filled, a whopping 32 percent reported that they did not get prescriptions refilled, even when recommended by their physicians. Another problem which surfaced was that about 15 percent discontinued taking their original prescription prematurely.

To prevent health hazards, needless deaths and hospitalizations, as well as lost workdays, physicians are urged to stress the importance of dosage instructions, refills, if warranted, and also to educate their patients on possible side effects.

Physicians should also be aware of the flip side of the coin in regards to prescribing drugs. According to St. Paul Insurance Company, the number of drug-related claims against physicians jumped 78 percent between 1979 and 1984, with costs jumping 168 percent. The average cost of a drug-related claim now exceeds \$25,000. The leading allegations in drug-related suits are physicians not controlling for side effects; usage of incorrect drugs; inadvertently prescribing an overdose; giving the wrong prescription; or unknowingly prescribing to drug addicts.

Although drug-related claims are at times due to patients' non-compliance with physicians instructions, such as patients ingesting tranquilizers or pain relievers regardless of prescription directions, physicians can be sued. Therefore, as already mentioned, it is essential that patients understand dosage instructions and the like.

In order to help prevent the risk of such liability claims, the Medical Insurance Exchange of California developed the following guidelines:

1) Obtain an accurate patient medication history the first time the patient is seen and periodically thereafter. Also ask about over-the-counter medications, including vitamins. An aide can take down this information while the patient is waiting.

2) Use a medication control record that is stapled to each patient's chart. Leave a space for refills, and instruct staff to mark initials of the aide and the pharmacist involved in each prescription order. Use the record to rule out possible drug interactions and to determine whether refills are needed.

3) Avoid prescribing to another physician's patient. If it's necessary, be sure to contact that physician. We

or she may already be prescribing the same drug, or attempting to reduce medication. Physicians should not prescribe for a condition that is being treated by another physician.

4) Establish special rules for physicians who share calls and regularly treat each other's patients. Approve only enough medications to carry the patient through until he or she sees his regular physician. The patient should be seen in person before a prescription is made. The call sharers should always inform each other of any prescriptions they have made.

5) Re-evaluate long-term medications periodically, such as antihypertensives, miotics, antidepressants and anticoagulants. For some drugs, long-term use requires periodic laboratory testing, and refusal to do so should be documented in the patient's chart.

6) Do not allow non-physicians in the office staff to prescribe drugs in their physician's name.

7) Write legibly and be especially careful with abbreviations so that there will be no misunderstanding at a pharmacy. For example, a sloppily scrawled "u", meaning "unit", could be mistaken for "0" or "4". Also, a carelessly written "each ear" could be mistaken for "each eye". In ".5 ml", the decimal point may be indecipherable and be mistakenly read as five milliliters. Always put a zero before the decimal point, ".05 ml".

Although these guidelines cannot guarantee a physician will not encounter a drug-related liability claim, the risks can be alleviated to a great extent.

Newsbrief

NEW DRIVER-LICENSE CATEGORY IN WISCONSIN

A new Wisconsin law grants physicians immunity from civil liability if they decide to report patients who insist on driving while medically impaired. Under the law, a new driver-license category has been birthed for individuals with certain temporary medical problems which would be considered an impediment in driving. Such individuals would get their licenses reinstated after proving their temporary impairments were abated or under control.

ENTER 1988 — THE YEAR OF THE DRAGON

The Chinese zodiac consists of a 12-year cycle, with each year named for a different animal that imparts specific characteristics to its particular year. Many Chinese believe that the year of an individual's birth is a major factor in determining that person's personality traits, physical and mental qualities, and the magnitude of success and happiness to be experienced by the person during his or her lifetime.

In Chinese astrology, 1988 is the Year of the Dragon, beginning on February 17, the Chinese New Year. The Dragon corresponds with the sign of Aries, and is said to be a year which brings sudden energy and enthusiasm. This is also a year for beginning important projects.

Those born in the Year of the Dragon are deemed as eccentric, lead a complex life, possess a passionate nature and enjoy abundant health. If you were born during the years 1916, 1928, 1940, 1952, 1964 or 1976, you, my friend, are a Dragon.

Generally, the Dragon is a sign of good luck, so perhaps 1988 will bring us just that. Incidentally, it is suggested that Dragons marry a Monkey or Rat late in life, and, at all costs, avoid the Dog!

Newsbrief

ATTORNEYS GOING BARE, TOO

According to the ABA Journal, a rising number of attorneys are practicing without professional liability insurance. It is estimated that 30 to 35 percent are dropping their coverage for the same reason physicians are — either unavailability or excessive cost.

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BOGUS CARRIERS

This association has been alerted as to the existence of three insurance carriers attempting to solicit malpractice business, of whom physicians should be forewarned.

At the request of one of our members, who was solicited by a company known as Professional Risk Insurers Management Exclusive Co. Ltd. (PRIME), TOMA contacted the Texas State Board of Insurance. According to the Insurance Board, "This company is not a licensed admitted carrier in Texas nor is it an eligible surplus lines company. We are not aware if they are operating as a risk retention group or risk retention purchasing group."

The Texas Insurance Board also forwarded TOMA a copy of a memorandum from John E. Washburn, Director of Insurance of Illinois, which reads as follows:

"The Illinois Department of Insurance has received information that an unauthorized insurance company, Casualty Assurance Risk Insurance Brokerage Company, is soliciting malpractice insurance business from Illinois physicians. Located in Guam, the company is not licensed in Illinois nor any other state and doctors are being warned against buying malpractice coverage from this entity.

"An affiliate company, New World Financial Trading and Reinsurance Corporation, also headquartered in Guam, may also be involved in illegal solicitations.

"The Department has obtained copies of both companies' Articles of Incorporation which list their equity subscribers, several of whom have been tied previously to Professional Risk Insurers Management

Exclusive Company, Ltd. (PRIME). The Department issued a cease and desist order to PRIME in September of 1986 to stop selling medical malpractice insurance in Illinois.

"The presence of some of the same equity subscribers in the operation of PRIME, Casualty Assurance Risk, and New World Financial very much concerns us," said Insurance Director John E. Washburn. "In the case of PRIME, we were advised of its refusal to pay malpractice judgments in other states and our major concern is that Casualty Assurance Risk and New World Financial will follow suit." For further information, contact Eta Mae Credi, 217/782-1757."

Texas physicians should be on the lookout for these carriers. Further questions may be directed to the State Board of Insurance, 1110 San Jacinto, Austin, 78701-1998.

NOM WEEK 88

The AOA reports that National Osteopathic Medicine Week 1988, to be observed September 25 to October 1, will feature a new look, new ideas and a new theme. With the approval of the AOA Public Relations Committee, the theme for NOM Week '88 is "Osteopathic Medicine Salutes the Nation's Seniors".

This theme links the osteopathic profession with the largest and increasingly influential group of healthcare consumers in the nation, persons age 65 and over.

The AOA will be mailing workers kits to participating groups in March and TOMA will feature ideas included in the kit in an issue of the *Texas DO*.

DIABETES EDUCATION PROGRAMS TO BE REIMBURSED UNDER MEDICARE

For the first time, Medicare will fund diabetes education programs, due to a new program which has been authorized by the HCFA.

Hospital outpatient facilities and rural health clinics meeting minimum guidelines, as delineated by HCFA, will be eligible for funding and should apply to the Texas Medicare intermediary (Blue Cross and Blue Shield of Texas Inc.) for appropriate processing of forms for reimbursement.

Each reimbursement request will be evaluated on a case-by-case basis and, each claim to the Medicare intermediary should be accompanied by a program description. Services must be by physician's order and provided to registered patients by personnel who are under medical staff supervision.

Generally, diabetics registered as outpatients may participate in education programs when they are newly diagnosed, unstable, or with a long-term diagnosis of diabetes, but with management problems.

The Texas Diabetic Council will be contacting outpatient education providers, at random, to monitor their experience with the Medicare intermediary. This strategy will allow the Council and the Task Force for Third Party Reimbursement to study issues requiring further clarification by HCFA and the Medicare intermediary.

Additional information may be obtained by contacting: Margaret Mendez, Bureau of Dental and

Chronic Disease Prevention, Texas Department of Health, 1100 West 49th Street, Austin, 78756, phone 512/458-7534. Questions on specific claims should be addressed to the Texas Medicare intermediary, Blue Cross and Blue Shield of Texas Inc., Attn: Rogers Coleman, M.D., 901 South Central Expressway, Richardson, 75201, phone 214/669-6122.

THE CITADEL — HELP FOR LEARNING-DISABLED CHILDREN AND FAMILIES

"Frequently, a parent assumes that their child is not motivated, when in fact, they have a learning disability," according to Margie Rike, R.N., Program Director for The Citadel, a 16-bed adolescent psychiatric unit located within Southwest Dallas Hospital (formerly Oak Cliff Medical and Surgical Hospital).

The Citadel offers three separate treatment programs for the child, pre-teen and teen, with each program directed toward rehabilitation of the child with learning disabilities or behavioral problems. Intensive family therapy, a vital link to mental wellness and family functioning, is a key element of the program. Another is a Dallas Independent School District teacher on staff, qualified to teach learning-disabled and emotionally disturbed children.

"Trust is the key to healthy relationships between parents and children," says Ms. Rike. "The intensity of The Citadel's newly-developed family sessions help transform attention seeking behaviors into open communication among family members. This results in less turmoil and conflict because we address individual needs directly. Usually, the whole family

environment is in need of help and The Citadel stresses parenting skills or helping the family find more effective ways to deal with their child's behavior."

The Citadel provides a staff of physicians, including psychiatrists, psychologists, educators and social workers trained in helping youth and their families to cope with questions and problems. The Citadel is owned and operated by Universal Health Services, Inc., of King of Prussia, Pennsylvania. Persons desiring more information about the unit can contact Ms. Rike at 214-943-0485.

BC/BS ASKS FOR DISMISSAL OF MEDICARE RECOUPMENT LAWSUIT

Blue Cross/Blue Shield of Texas has asked the TMA and others, which includes TOMA, to dismiss the lawsuit brought against the insurer and the HCFA over the \$14 million in so-called "overpayments" made to Texas physicians and Medicare beneficiaries.

In turn, TMA has filed a response and brief opposing the request. As stated in the January issue of the *Texas DO*, a preliminary injunction was granted to the plaintiffs on October 29 in U.S. District Court, Austin. This move prevents the HCFA from recouping the money it claims was overpaid, as a result of 1985 coding changes, until a trial on the merits of the case is heard.

Although a trial date has not yet been set, the TMA and other plaintiffs continue to build the case as a class action suit. This will aid in the effort to obtain refunds for money already paid to HCFA.

A Spring Update for the Family Practitioner II

Saturday, April 2, 1988

PRESENTED BY:

Dallas Family Hospital and
Texas College of Osteopathic
Medicine's Office of CME

SUPPORTED BY:

Dallas Southwest Osteopathic
Physicians, Inc.

LOCATION:

Dallas Family Hospital
2929 S. Hampton
Dallas, Texas 75224

TOPICS:

Office of Pediatrics
William F. Stiles, D.O.

*Manipulative Therapy for the
Upper and Lower Extremities*
Dan L. Rader, D.O.

*Office Techniques in
Degenerative Arthritis*
Tero J. Walker, D.O.

*Postural Balancing: An Improved
Regimen Permitting the Routine Re-
versal of Musculoskeletal Dysfunction*
Robert E. Irvin, D.O.

Diarrhea Update 1988
H. L. Schneider, D.O.

Attention Deficit Disorders
Julian S. Haber, M.D.

*Office Management of
Asthmatic Bronchitis*
Norman M. Kopman, D.O.

*Diabetes: Balancing Nutrition,
Exercise and Pills*
C. Raymond Olson, D.O.

*The Highly Automated Medical
Office-Including Medical Records*
Bryan Stone, M.D.

Diabetes: Insulin Therapy
Steve D. Johnson, D.O.

7 Hours, Category 1-A, AOA

CONTACT:

Cheryl Cooper
Continuing Medical Education
Texas College of Osteopathic Medicine
817/735-2539

FEES:

Physicians \$130
TCOM Affiliated Physicians . . . \$70
Externs/Interns/Residents . . No charge

TEXAS TICKER TAPE □ □ □ □ □ □

1988 MEDICAL PRACTICE ACT OF TEXAS BOOKLET AVAILABLE

As of press time for this issue of the *Texas DO*, the newly revised and updated 1988 Medical Practice Act of Texas and Other Statutes Relating to Physicians booklet was being finalized for printing. To obtain a copy of the booklet, please order from: Texas State Board of Medical Examiners, 1101 Camino La Costa, Suite 201, P.O. Box 13562, Capitol Station, Austin, 78711 or phone 512-452-1078.

TOMA PRESIDENT TO SERVE ON HEALTH PROFESSIONS EDUCATION ADVISORY COMMITTEE

TOMA President Bill H. Puryear, D.O., has been appointed as an ex-officio member of the Texas Higher Education Coordinating Board's Health Professions Education Advisory Committee.

Membership in the Committee is composed of higher education representatives from various health education fields and ex-officio non-voting representatives from several health professional organizations. Dr. Puryear will, of course, be representing TOMA.

The Committee is studying broad-based issues of concern in health education, including the review of proposed new health-related degree and certificate programs, and acts in an advisory capacity to the Commissioner, Kenneth H. Ashworth, and his staff.

Dr. Puryear succeeds William R. Jenkins, D.O., of Fort Worth.

Our congratulations are extended to Dr. Puryear, whom we know will represent TOMA in a most valuable capacity.

YET ANOTHER LIABILITY TRAP

Basing its ruling on a distinction between referrals and consultations, the Maine Supreme Judicial Court recently ruled that a primary-care physician's obligation to warn does not come to a halt when a consultation is sought. The court's opinion indicates that a physician would have no further responsibility towards a patient if he or she formally refers such patient, rather than just sending the patient to a surgeon for a consultation. In this case, the

patient agreed to a surgeon's recommendation, giving written consent, and was operated upon. Unfortunately, the surgery did not go as planned and the patient thus filed suit against both physicians. The surgeon settled and a jury asserted a \$200,000 verdict against the primary-care physician, claiming the physician was negligent in that he did not discuss alternatives to surgery with the patient.

TOLL-FREE NUMBER FOR OCOO

The Osteopathic College of Ophthalmology and Otorhinolaryngology (OCOO) has announced a toll-free number to the OCOO central office, as a new service for its membership. The phone is 1-800-782-5355, operational 9:00 a.m. to 4:30 p.m., Eastern Time. Please make note of this number.

NO SIGN OF ATTORNEY SURPLUS DECREASING

According to the ABA Journal, even though the number of individuals applying to law schools has dropped 12 percent during the last few years, 35,000 new attorneys gain entry into the field on an annual basis. At this rate, the year 2000 will find approximately one attorney for every 300 persons in the United States.

ADDITIONAL TOLL-FREE NUMBER FOR TEXAS TAX QUESTIONS

Many recent changes in Texas tax laws have prompted the Comptroller's Office to add another toll-free number to speed service to callers. You can call without charge from anywhere in Texas.

For taxpayers with tax questions or problems relating to their accounts, the number to call for assistance is still 1-800-252-5555.

All others who have questions or need information can call the new toll-free number: 1-800-531-5441. According to Bob Bullock, Comptroller of Public Accounts for the State of Texas, using the correct toll-free number can save time, money and trouble for everyone.

MATERNITY CENTER OPENS AT MESQUITE COMMUNITY HOSPITAL

A two million dollar expansion to Mesquite Community Hospital was formally opened in December, adding a 13,400 square foot Maternity Center. The new, state-of-the-art facility offers an increased capacity and capability of obstetrical services for residents of eastern Dallas County and East Texas. Features of the new Maternity Center include seven LDR rooms (where labor, delivery and recovery occur in one room in a home-like setting); remodeled private postpartum rooms; a 16-bassinet neonatal nursery for well babies; and a five-bassinet unit for newborns requiring more specialized treatment. Mesquite Community Hospital is located at Interstate 30 at Motley Drive in Mesquite.

TCOM PRESIDENT TO SERVE IN GOVERNOR'S EXECUTIVE DEVELOPMENT PROGRAM

David M. Richards, D.O., president of Texas College of Osteopathic Medicine, has been chosen by Governor William P. Clements as a participant in the governor's Executive Development Program.

The program provides an opportunity for Texas state government executives to strengthen their leadership and management skills. Participants and graduates of the program form an interagency network of executives dedicated to planning the future direction of the state's services.

Dr. Richards has been president of TCOM since January 1986. He had been an administrator at TCOM since 1981. A general practitioner in Ohio for 15 years, he left private practice in 1976 to join the faculty and administration of Ohio University College of Osteopathic Medicine prior to his appointment in Fort Worth.

CLARIFICATION

A clarification is in order in regards to the article entitled "Process Outlined to Appeal Decisions of Texas PRO", which appeared in the December 1987 *Texas DO*.

The information which this article conveys was directed to peer review organizations from HCFA and concerns how PROs will submit documentation for cases under appeal — not how physicians may request an appeal.

Fourth Annual Conference

FITNESS IN SPORTS

Diagnosis and Management of Common Sports Injuries

SATURDAY, MARCH 5, 1988

Presented by:

Texas College of Osteopathic
Medicine's Office of Continuing
Medical Education; Supported by
Dallas Southwest Osteopathic
Physicians, Inc., Department of
Public Health and Preventive
Medicine and Division of
Rehabilitation/Sports Medicine

Location:

Medical Education Building 2
Kiva Room 2-106
Texas College of
Osteopathic Medicine
3516 Camp Bowie Boulevard
Fort Worth, Texas 76107

Topics:

Rehabilitation of Musculoskeletal
Injuries, *David E. Teitelbaum, D.O.*;
Cardiovascular Adaptations to Exer-
cise Training, *Peter Raven, Ph.D.*,
F.A.C.S.M.; Nutrition for the Con-
ditioning Athlete, *Joe Davis, M.D.*;
Return to Contact Sports after
Cerebral Concussion, *Robert C.*
Cantu, M.D.; Foot and Leg Eval-
uations-Injury Prevention, *Myron I.*
Krupp, D.P.M.; Psychological As-
pects of Sports Performance, *Craig*
H. McQueen, M.D.; Adequate Con-
ditioning for Prevention of Sports
Injuries, *Wayne English, D.O.*, *F.A.*
O.C.R.M.; Conditioning for Injury
Prevention in the Lower Extremity,
Jay Blakey, M.S.; A Workshop:
Functional Taping of the Lower
Extremity for Prevention of Injury.

Contact:

Cheryl Cooper, Coordinator
Continuing Medical Education
Texas College of
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817/735-2539

Accreditation:

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PHYSICIANS WANTED

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PHYSICIAN PRACTICE — Opportunities are currently available in prospering northeast Tarrant County. The Mid-Cities area of the Dallas/Fort Worth Metroplex is currently experiencing exceptional population growth. Opportunities now exist for aggressive family practitioners and other specialists in areas near Northeast Community Hospital. Northeast Community is a full service, state-of-the-art, acute care hospital. With nine-bed emergency center, twelve-bed ICU/CCU, five surgical suites, CT scanning, MRI, and nuclear medicine. Northeast serves the Mid-Cities with comprehensive total health care. Recruitment assistance is available. Send C.V. and letter of introduction to Mr. Rob Martin, Administrator, and C.E.O., Northeast Community Hospital, 1301 Airport Freeway, Bedford, 76021. (16)

ASSOCIATE TO JOIN — Established GP/FP in Irving/Mid-Cities area. Initial income support. Ownership potential. Confidential reply to Box "403", 226 Bailey, Fort Worth, 76107. (27)

WANTED — General Internist to join a group of four family doctors and general surgeon — Very busy established practice. Inquiries should contact Dr. Welden Glidden at 817/926-2641 or 1305 E. Seminary Drive, Fort Worth, 76115. (44)

IRAAN — The community of Iraan is seeking a physician to join with present physician in family practice. Located 85 miles south of Midland-Odessa area, Iraan serves a community of 2,000 residents plus, and an area population of 5,000. Lucrative financial package offered. If interested, call or write Paul Harper, Administrator, General Hospital, P.O. Box 665, Iraan, 79744; 915/639-2871. (03)

PRACTICE AND EQUIPMENT FOR SALE — Office building is also for sale or lease. Contact: Joseph L. Love, D.O., 4400 Red River Street, Austin, 78751 or call 512/452-7641. (30)

FOR SALE — Family practice in small central Texas town. Gross 100M. Buy only the real estate at appraised market value, financing available. Contact: TOMA, Box "406", 226 Bailey Avenue, Fort Worth, 76107. (17)

POSITION AVAILABLE — Excellent opportunity and growth potential for general practice physician. Looking for enthusiastic, self motivated and aggressive person. Immediate opening in northern Oklahoma. For information contact: Griffith & Associates, William A. Griffith, 6846 South Canton, Suite 410, Tulsa, Oklahoma 74136 or call 918/493-6139. (46)

GENERAL AND FAMILY PRACTITIONER NEEDED — for well established and fast growing Minor Emergency Center located south of Fort Worth. Excellent opportunities available. Please send resume or contact B. Craig Nelson, D.O. or William A. Thomas, Jr., D.O., Burleson Minor Emergency Center, 344 S.W. Wilshire Blvd., Burleson, 76028 or call 817/447-1208. (49)

ORTHOPEDIC SURGEON — Doctors Memorial Hospital, Tyler, Texas is searching for an orthopedic surgeon. The hospital has recently purchased an additional \$175,000 worth of orthopedic equipment including a new C-arm, orthoscope, fracture table and so forth. Income potential unlimited, free office available. Contact Olie Clem, 1400 West SW. Loop 323, Tyler, 75701. Phone: 214/561-3771. (50)

FOR SALE — Family practice in West Texas, very large clinic. Room for two family practice doctors, high gross, excellent net, six treatment rooms, well equipped osteopathic practice. Other practices available in Bryan and Dallas. Contact: Gary Clinton, PMA, 214/327-7765. Practice appraisal/sales, Health Care Professional Consultant. (43)

APPLICANTS BEING SOUGHT — for Assistant or Associate Professor position to teach in a Department of Manipulative Medicine. Prior teaching experience required. Salary negotiable. Please submit C.V. to Jerry L. Dickey, D.O., TCOM, 3516 Camp Bowie, Fort Worth, Texas 76107. TCOM IS AN EQUAL OPPORTUNITY EMPLOYER. (33)

KNOX — Family practice opportunity available now! Meets National Health Service Corps requirements and Physicians Student Loan Program Repayment Requirement. Solo practice in Texas County of around 6,000 population. Town approximately 1,800 population, good school, golf course, and churches. Rent free, furnished clinic and monthly guarantee for first year. Rural tax supported hospital of 28-beds with one other physician on medical staff to relieve call. First year expected earnings gross over \$100,000. Call collect: 817/658-3535 or send C.V. to D.L. Stong, Hospital District Administrator, P.O. Box 608, Knox City, 79529. (04)

WANTED — General/Family practice physician to join two, too busy, practitioners in progressive vigorous rural community. Good schools and excellent recreational opportunities in smog-free, low-crime environment. No OB or major surgery. 20-bed hospital and 82-bed nursing home within walking distance of clinic. Reasonable schedule with ample vacation time and CME opportunity. 45 miles to city of 80,000 with State University. Compensation negotiable. Phone 915/869-6171. (06)

COLORADO D.O. PSYCHIATRIST — A unique opportunity for specialty practice for D.O. Psychiatrist on western slope of Rocky Mountains with superior quality of life. Join compatible family of 40 D.O.s and 78 bed AOA accredited non-profit (VHA) acute care hospital serving 84,000 population. Practice assistance packages available to qualified candidate. Contact Executive Director via collect telephone 303/242-0920 or send resume to Roger C. Zumwalt, Executive Director, Community Hospital, 2021 N. 12th, Grand Junction, Colorado 81501. (12)

DALLAS, FORT WORTH, MINER AL WELLS — Opportunities for full or part-time D.O. or M.D. emergency physicians who practice quality emergency medicine. BC/BE encouraged, but not required. Several low and medium volume osteopathic and mixed specialty hospitals in North Texas area available. Competitive hourly guarantee with malpractice stipend. Send C.V. to Glenn Calabrese, D.O., OPEM Associates, P.A., 100 N. University Drive, #220, Fort Worth, 76107. 817/332-2313. (21)

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EXCELLENT TEXAS OPPORTUNITY — in cardiology, ENT, family practice, general surgery, internal medicine, OB/GYN, oncology, orthopedic surgery, vascular surgery, urology, industrial medicine. Excellent quality of life, first year guarantee, etc. Reply with C.V. or call Armando L. Frezza, Medical Support Services, 8806 Balcones Club Drive, Austin, 78750, 512/331-4164.

POSITIONS DESIRED

PHYSICIAN SEEKING — General practice opportunity in Dallas/Fort Worth and surrounding area or Hill Country areas. Have passed FLEX and will complete General Practice residency in August, 1988. Please send inquiries to: TOMA, Box "405", 226 Bailey, Fort Worth, 76107. (01)

PHYSICIAN SEEKING GENERAL PRACTICE OPPORTUNITY — in the East Texas or Hill Country areas. Completes General Practice residency in August, 1988. Please send inquiries to: TOMA Box "408", 226 Bailey, Fort Worth, 76107. (02)

PHYSICIAN ASSISTANT (Board Certified) — seeks part-time position; has had five years experience as first assistant to general surgeon. Interested in general surgery, internal medicine and family practice. Contact: John G. Henevad, 1111 N. O'Connor Road, # 121, Irving, 75061. Phone: 214/254-6523. (07)

PHYSICIAN SEEKING — part-time locum tenens work in Dallas/Fort Worth or Denton area in General/Family practice and/or OMT (no OB/GYN). Available for Mondays, Fridays and Saturdays. Contact Jan T. Hendryx, D.O., at 817/335-8140. (48)

PHYSICIANS ASSISTANT — former Army PA (CS#) who is currently a first year student at TCOM. Desires consideration for part-time and summer employment. Over five years of family practice and emergency room experience. Contact: William J. Williams, 345 Hallmark Drive West, Fort Worth, 76134, 817/551-5211.

OFFICE SPACE AVAILABLE

MEDICAL OFFICE FOR LEASE — 2,500 sq. ft. office space suitable for two doctors; six exam rooms, dual lab, x-ray and two offices. Good location in Fort Worth. Phone 817/284-4195. (25)

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PROFESSIONAL OFFICE SUITE AVAILABLE — in prospering northeast Tarrant County, part of Dallas/Fort Worth metroplex. Professional building adjacent to Northeast Community Hospital, 1401 Airport Freeway, Bedford, 76021. Contact: Mr. Phil Young, Northeast Community Hospital, 817/283-6700. (20)

TWO MEDICAL OFFICE SPACES FOR LEASE — in Euless, heart of booming Metroplex in established location near Harris HEB and Northeast Community Hospitals. 1500+ and 1600+ square feet — \$9.00 per foot including utilities. X-ray equipment available on premises; pharmacy on premises. Call Bill Wyatt, 817/481-5158 or 817/282-6717; or write 701 W. Pipeline Road, Hurst, 76053. (31)

NORTH DALLAS/PARK CITIES — Ideal office space available. Over 1,000 square feet finished out space. Located in Highland Park, near North Central Expressway, it is a perfect location for an osteopathic practice. For further information contact John Hawkins 214/522-9767. (52)

CLINIC FOR SALE — Walk-in Clinic/Family Practice in rapidly growing D/FW Metroplex. Three exam rooms, fully equipped X-ray and lab, established patient load. Room for expansion. Multiple financial options available for purchase. Contact: TOMA, Box "410", 226 Bailey Avenue, Fort Worth, 76107. (32)

LAND NEAR TCOM FOR DOCTOR'S OFFICE — excellent location, reasonably priced, over 14,000 sq. feet of land, zoned for professional office. Corner of Arch Adams and West 5th Street. Cost \$8 per square foot, negotiable. Contact: Roger S. Jones, 817/332-4542 or Larry M. Thompson, 817/332-7393.

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FOR SALE — Ames serializer in excellent condition. Includes full blood chemistry, pheophylline and potassium. Asking \$2,000.00. Contact: William R. Boone, D.O., 214/391-1168. (11)

FOR SALE — Serializer Blood Analyzer with all modules; used 18 months; new condition; \$1200. Contact: Sylvia Herr, D.O., 109-B North Main, Cleburne, 76031; 817/641-2061. (26)

RECONDITIONED EQUIPMENT FOR SALE — Examination tables, electrocardiographs, sterilizers, centrifuges, whirlpools, medical laboratory equipment, view boxes, weight scales, IV stands and much more. 40-70 percent savings. All guaranteed. Mediquip-Scientific, Dallas, 214/630-1660. (29)

SKI NORTHERN NEW MEXICO — including Taos, Angel Fire and Red River. Condo in Red River sleeps eight comfortably. Call Stan or Priscilla Briney 817/441-9373. (47)

FOR SALE — Bausch-Lomb monocular microscope \$100.00. Pelton electric sterilizer, centrifuge, National ophthalmoscope, miscellaneous instruments, etc. Contact: Dr. Kenneth Ross, Tyler, 214/566-2364. (42)

FOR PHYSICIANS: UNSECURED SIGNATURE LOANS — \$5,000 — \$60,000. No points or fees. Best rates-level payments. Up to six years to repay. Call toll free 800/331-4952, MediVersal, Dept. 114. (22)

FOR SALE — Defibrillator — Top of Line — Cost \$6,000.00 — Never used. MAKE ME AN OFFER. Contact: Ray Rollins, D.O., 3900 Buckner Blvd., Dallas, Texas 75227. 214/388-4486. (18)



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D02/88

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☐ \$1,000,000/\$1,000,000

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