

## William D. Hospers, D.O. Assumes TOMA Presidency

Highlights from the 1995 Annual Convention  
begin on page 18.



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Dallas Metro	429-9120

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Established new physician (solo)	214/766-6162
Established new physician (group)	214/766-6163
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### Medicaid/NHIC

Texas Medical Foundation	512/343-4984
Medicare/CHAMPUS General Inquiry	512/329-6610
Medicare/CHAMPUS Beneficiary Inquiry	800/725-9216
Medicare Preprocedure Certification	800/725-8315
Private Review Preprocedure Certification	800/725-8293
Texas Osteopathic Medical Association	800/725-7388
	512/388-9400

in Texas 800/444-TOMA

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817/294-2788

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in Texas 800/896-0680

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in Texas 800/444-TOMA

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	FAX No. 512/834-4597

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Complaints Only	800/201-9353

Texas State Board of Pharmacy	512/832-0661
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Texas Workers' Compensation Commission	512/448-7900
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Medical Review Division	512/440-3515
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Texas Hospital Association	800/252-9403
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Regulatory Services	512/450-4800
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State of Texas Poison Center for	
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Doctors & Hospitals Only	713/765-1420
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800/392-8548

Houston Metro 654-1701

### FEDERAL AGENCIES:

Drug Enforcement Administration:	
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For state narcotics number	512/465-2000 ext. 3074
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For DEA number (form 224)	214/767-7250
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### CANCER INFORMATION:

Cancer Information Service	713/792-3245
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in Texas 800/392-2040

# TEXAS D.O.

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

## FEATURES

Page

TOMA Committee Appointments	5
William D. Hosper, D.O., is New TOMA President	6
Major Actions of the TOMA House of Delegates	10
Merilyn J. Richards Assumes ATOMA Presidency	12
TOMA Presents Distinguished Service and Meritorious Service Awards	13
Highlights of TOMA's 96th Annual Convention	18
In Memoriam:	20
Charles D. Buckholtz, D.O.	
Joseph L. Love, Sr., D.O.	
Virginia P. Ellis, D.O.	
TOMA's Building Fund Campaign Recognizes "Texas Stars"	21
Identifying and Treating Summer Depression	23

## DEPARTMENTS

Calendar of Events	4
Membership On-The-Move	18
What's Happening in Washington, D.C.	24
Self's Tips & Tidings	26
News from Osteopathic Health System of Texas	28
ATOMA News	29
District Stars	30
Texas Society of the ACOFP Update	32
News From the University of North Texas Health Science Center at Fort Worth	34
Public Health Notes	38
Letters	39
Blood Bank Briefs for Physicians	40
Practice Locations in Texas	42

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July/August, 1995

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## Calendar of Events

### SEPTEMBER 9

TOMA Board of Trustees Meeting  
Location: Doubletree Hotel Guest Suites  
Austin, Texas  
Contact: 512-388-9400 or 800-444-8662

### 22-24

Sixth Annual Mid-Year Seminar  
Sponsored by Osteopathic Physicians  
and Surgeons of California  
Location: Monterey Plaza Hotel  
Monterey, California  
Hours: 20 Category 1-B anticipated  
Contact: OPSC  
455 Capitol Mall, Suite 230  
Sacramento, CA 94814-4405  
916-447-2004

### SEPTEMBER 29-OCTOBER 1

Primary Care Update XII  
Sponsored by University of North Texas  
Health Science Center at Fort Worth  
Location: UNTHSC/FW,  
Fort Worth, Texas  
Hours: 18 Category 1-A, AOA  
Contact: Pam McFadden,  
Program Director  
817-735-2539

### SEPTEMBER 29-OCTOBER 1

American College of Osteopathic  
Pediatricians Fall Meeting  
Location: Adam's Mark Hotel  
St. Louis, Missouri  
Contact: ACOP, 202-362-3229

### OCTOBER 5-7

Manipulative Update  
Sponsored by Kirksville College of  
Osteopathic Medicine  
Location: Kirksville, Missouri  
Hours: 20 Category 1-A  
Contact: Rita Harlow,  
Director, Continuing Education  
KCOM  
800 West Jefferson  
Kirksville, MO 63501  
816-626-2232

### 14-18

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

### 15-19

American Osteopathic Academy of  
Addictionology  
Location: Orlando, Florida  
(In conjunction with the  
American Osteopathic  
Association Annual Conventi  
and Seminar.)  
Contact: 202-966-7732

### 19

"The Just Allocation of Scarce Resour  
Ethical Issues to Learn from Organ  
Tissue Transplantation"  
Sponsored by Colorado Springs  
Osteopathic Foundation  
Location: Broadmoor Hotel  
International Center  
Colorado Springs, Colorado  
Contact: Amanda Batey, Colorado  
Springs Osteopathic Foundat  
719-635-9057;  
fax 719-635-4727

### 19-22

TOMA Postconvention CME Trip to O  
Rios, Jamaica  
Contact: TOMA  
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# William D. Hospers, D.O., Assumes TOMA Presidency



**DR. WILLIAM D. HOSPERS**

William D. Hospers, D.O., of Fort Worth, has been elected President of the Texas Osteopathic Medical Association for 1995-96. Installation ceremonies took place June 17 during TOMA's 96th Annual Convention and Scientific Seminar, held June 15-18, at the Grand Kempinski in Dallas.

A native of Illinois, Dr. Hospers received a B.A. in Zoology and Chemistry from North Central College, Naperville, Illinois. He earned his D.O. degree in 1959 from Kirksville College of Osteopathic Medicine, Kirksville, Missouri, and interned at Lakeview Hospital, Milwaukee, Wisconsin. After practicing in Detroit, Michigan for 11 years, Dr. Hospers entered into an orthopedic surgery residency at Detroit Osteopathic Hospital, which he completed in 1976, subsequently serving two years of active duty in the U.S. Army. He was a Flight Surgeon in the U.S. Army Reserves Medical Corps, retiring in 1990 with the rank of Colonel.

In 1978, Dr. Hospers began his private orthopedics practice in Fort Worth. He is certified in Family Practice, an Aviation Medical Examiner (Class I - Airline), and participated in the

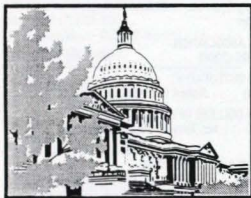
Intern and Residency Training programs at Northeast Community Hospital in Bedford, and Dallas/Fort Worth Medical Center, Grand Prairie.

An active member of TOMA since 1978, Dr. Hospers serves on, and chairs, numerous Association committees. He has been a member of the TOMA House of Delegates for 16 years, and a member of the Board of Trustees since 1985. In addition, he is an active member and past president of his district society, TOMA District XV.

Other past and current memberships include the American Osteopathic Association, the American College of Osteopathic Family Physicians, the Aerospace Medical Association, the Midwest Osteopathic Orthopedic Society, the Society of U.S. Army Flight Surgeons and the Association of Military Surgeons of the U.S.

Dr. Hospers has a long history in aviation and is a commercial pilot and Certified Flight Instructor. He is also a Certified Aircraft Mechanic, and has a strong interest in the restoration of bygone-era war planes, which eventually led to his founding B.C. Vintage Flying Machines and the Vintage Flying Museum, both in Fort Worth.

Dr. Hospers and his wife, Chuckie, reside in Fort Worth. They are the parents of April, who lives in Keller with her family; Robert, a resident of McAllen; and Teri, who resides with her family in Virginia.



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# Activities of the TOMA House of Delegates

resolution supporting legislation on the state and federal level that would require all managed health care plans to allow their enrollees, who live more than 20 miles from the nearest network physician or hospital, to utilize a physician hospital of their choice at no extra charge, was among the resolutions taken during the June 14 annual meeting of the TOMA House of Delegates.

Action taken on all presented resolutions are printed elsewhere in this issue.

The election of officers highlighted the meeting, with Paul J. Speece, III, D.O., of Burleson, elected President; and R. Greg Maul, D.O., of Lubbock, Vice President. William D. Hospers, D.O., of Fort Worth, assumed the TOMA presidency, succeeding T. Eugene Zachary, D.O., of Fort Worth.

Jack McCarty, D.O., of Lubbock, was elected to a three-year term on the TOMA Board of Trustees; and Nelda N. Cuniff, D.O., of Burleson, Hector Lopez, D.O., of El Paso, and Rodney Wiseman, D.O., of Whitehouse, were all re-elected to three-year terms on the Board.

Mark A. Baker, D.O., of Fort Worth, was re-elected Speaker of the House of Delegates, and Monte E. Troutman, D.O., of Fort Worth, was re-elected Vice Speaker.

TOMA members elected to three-year terms to the American Osteopathic Association House of Delegates were Jim Czewski, D.O., of Fort Worth, and R. Greg Maul, D.O., of Lubbock. Re-elected to three-year terms were Robert L. Peters, Jr., D.O., of Round Rock, as chairman, Royce K. Keilers, D.O., of LaGrange, Bill H. Puryear, D.O., of Fort Worth, and Dr. Speece. Additionally, Dr. Baker was elected to fill an unexpired two-year term, and Dr. Rodney M. Wiseman, D.O., of Whitehouse, was elected to fill an unexpired one-year term.

Elected as alternate delegates to the AOA House were James E. Froelich, III, D.O., of Bonham, as first alternate; Joseph A. DelPrincipe, D.O., of Arlington, as second alternate; Daniel W. Saylak, D.O., of Bremond, as third alternate; Steve E. Rowley, D.O., of Chandler; Donald F. Vedral, D.O., of Cedar Hill; Dr. Cuniff; Elizabeth A. Palmarozzi, D.O., of Granbury; Richard M. Hall, D.O., of Eden; Al E. Faigin, D.O., of Fort Worth; Dr. Troutman; Ray L. Morrison, D.O., of Tyler; and George M. Cole, D.O., of Amarillo. In addition, Student Doctor Brent Sanderlin of Texas College of Osteopathic Medicine in Fort Worth was elected as a student delegate; and Student Doctor Heather Horne was elected an alternate. ■

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Pharmacy

*A*PPLE Club  
(Prevention Program  
for Seniors)



# Dr. Hospers Calls For Stronger Patient Advocacy and Increased Teamwork Between Osteopathic Physicians and TOMA



Dr. William D. Hospers

**Editor's Note:** The following is the speech presented by William D. Hospers, D.O., on President's Night upon assuming the TOMA Presidency for 1995-96.

Many of the ideas and goals I want to present tonight have already been expressed by our guest speakers this week. This would certainly indicate that these are areas of concern around the country.

I am alarmed at the change of authority as to who dictates treatment of a patient, and the restrictions and rationing of indicated and necessary care. It means that we, as physicians, now must insist not only that we treat a patient in a way that is best for them in their life-style, but also fight for the patient's right to be treated at all in this new arbitrary system.

Secondly, I want to see us solving our professional problems as a cooperative, cohesive group as we did when our unique professional lives were threatened by outside political groups.

The following four areas are those which I hope to address during my tenure as TOMA President:

1. Focus on sensible patient care, and defense of the patient.
2. Negotiate with Third Party Payors, and make them credible and accountable for their decisions and policies.

3. Emphasize working together as the unique group physicians that we are.
4. Rally around our new Headquarters, both physically and spiritually!

I am filled with anger when I am denied testing a treatment of a patient for a condition that all my experience and the overwhelming literature dictates should be done. This anger is exacerbated when the denying party has not seen the patient! It is even more infuriating when you call the company and the person making the decision cannot pronounce or comprehend the very common condition that you are calling about. Ladies and Gentlemen, these Third Party Payors are illegally practicing medicine! To count this, at the very minimum we must:

---

**"Protect your patients!  
Support your organization!  
Work together!"**

---

1. Insist on discussing the case with their Medical Director.
2. Insist on having their denial of testing or treatment in writing; and have them assume in writing their responsibility for the outcome of the patient's condition from their denial of care.
3. Correspond with them by Certified Mail.
4. Package all pertinent information and send one copy to their regulating agency, and the other copy to the State Medical Board!

If they persist in jeopardizing your patients' health and your legal liability, then we must expend every effort possible to make them responsible and accountable.

Perhaps even more baffling to me is the company that insists on tests and treatment that are not indicated. Use the same aforementioned queries. Medicine is an art and a science. Protect your patients from irrelevant, redundant accounting techniques of For-Profit institutions:

1. Insist that your patients read their choices of health contracts before they choose their own, and certainly read it before they have to use it.
2. Remind your patients of the importance of freedom of choice of their Health Care Professionals at all institutions. Good medicine will always require compatible matching of patient and doctor.
3. Bring the Third Party Payors to the negotiating table. There has got to be a compatible middle ground. I will probably require going through your professional organization (TOMA).



When I came to Texas, I was impressed with the teamwork camaraderie. We worked together in our own hospitals. We had active interchange at our staff meetings. We worked together at the local, state and national levels for the welfare of our osteopathic community. We socialized together! We no longer can claim our own hospitals. We have been enticed to attend staff meetings. We have ambivalent feelings about whether to go to M. D. or D.O. meetings and then don't go to either. We are going to mixed staff hospitals, but are missing out on the old hallway consultations. Amazingly, even the hospital administrators are complaining about this lack of participation.

No group can survive in politics without working together. No solo practitioner can survive on his own. Everyone should be embarrassed to have a few of their colleagues fight their battles for them without pitching in and helping them. Now only common institution fighting for us on the state level is TOMA and its local districts. Fortunately, you are well represented by TOMA and they are protecting you. However, TOMA has to play the numbers game. The first thing one asks TOMA is how many people do you represent? Are you one of them? Probably the greatest complaint I hear from members and non-members is that "they don't feel they have a voice in elections or policy-making" or "only a select run things." I would like to change this misconception. I would like you to write to me and tell me how you feel you have more voice.

Here are some of the suggestions I have received:

- 1) JOIN TOMA;
- 2) VOLUNTEER for jobs in TOMA (then you are one of the SELECT FEW);
- 3) Form a Nomination Committee, made up of a person from each district, to decide future officers and policies;
- 4) While keeping the district political unit, send out individual voting ballots for elections and major policy decisions. This would require a Bylaw change, but I personally think this would address the "equal voice" concern; and
- 5) Divide the state into equal member regions, by districts, as we have done for our Convention Program Committee.

Finally, we now have a fantastic location in our state capitol in Austin. It is one block from the Capitol building, and in the heart of the organizations with whom we do business. Let's rally to pay for this with donations, public relations, fund raisers, and the enthusiasm I've seen this organization garner in the past!

Protect your patients! Support your organization! Work together!

# Call It A Healthy Expansion.

One of our family clinics is right near you. For new directions in preventive health care, just call 735-DOCS (3627).

## Western Hills

Osteopathic Family  
Medicine Clinic  
3312 Phoenix Drive  
Fort Worth, Texas 76116  
(817) 244-1313

## Fossil Creek

Osteopathic Family  
Medicine Clinic  
3300 Western Center Blvd.  
Suite 114A and 114B  
Fort Worth, Texas 76137  
(817) 232-9767

## Aledo

Aledo Rural Health Clinic  
FM 1187  
Lasater Shopping Center  
Aledo, Texas 76008  
(817) 441-7181

## University Drive

Osteopathic Family  
Medicine Clinic  
3750 S. University Drive  
Suite 201  
Fort Worth, Texas 76109  
(817) 924-6582

## Saginaw

Osteopathic Family  
Medicine Clinic  
120 W. McLeroy  
Saginaw, Texas 76179  
(817) 232-9877

## Mansfield

Mansfield  
Rural Health Clinic  
501 E. Broad St.  
Mansfield, Texas 76063  
(817) 473-6750

## East Berry

Osteopathic Family  
Medicine Clinic  
3514 E. Berry St.  
Fort Worth, Texas 76105  
(817) 531-2801

## Burleson

Old Towne Rural  
Health Clinic  
780-B N.E. Alsbury Blvd.  
Burleson, Texas 76028  
(817) 447-8080

## Candleridge

Osteopathic Family  
Medicine Clinic  
7311 S. Hulen St.  
Fort Worth, Texas 76133  
(817) 346-1925



Osteopathic Family Medicine and Rural Health Clinics

A sense of community, a sense of family.

Affiliates of Osteopathic Health System of Texas.

# Major Actions of the TOMA House of Delegates

**MOTION:** That life memberships in TOMA be approved for Drs. Robert Paul Kelley, Jack P. Leach, C. Raymond Olson, Hartley Polasky, Ellwood B. Rockwell, Robert E. Springer, Lee Walker and Dean A. Wierman.

## APPROVED

**MOTION:** That the Constitution and Bylaws be changed by adding the following (all new language):

## BYLAWS:

### ARTICLE VII - BOARD OF TRUSTEES

**SECTION 14 - Indemnification.** It is the intention of the Association that these bylaws which deal with indemnification of present or former trustees, officers, employees or agents comply with the Texas Non-profit Corporation Act, Texas Revised Civil Statutes, Article 1396-2.22A (Vernon Supp. 1993).

The Association may indemnify any trustees, officer, employee or agent who is threatened to be made a named defendant or respondent in a proceeding because the person is or was a trustee, officer, employee or agent of the Association. A present or former trustee, officer, employee or agent may be indemnified against judgments, penalties (including excise and similar taxes), fines, settlements, and reasonable expenses, which include court costs and attorneys' fees, actually incurred by the person in connection with the proceeding.

The Association may indemnify the person only if it is determined that the person conducted himself/herself in good faith, and that he/she reasonably believed that his/her conduct was in the best interest of the Association; and in the case of any criminal proceeding, that the person had no reasonable cause to believe his/her conduct was criminal. This determination must be made by a special legal counsel selected by a majority vote of a quorum consisting of all trustees who, at the time of the vote, are not named defendants or respondents in the proceeding. The special legal counsel shall also determine the reasonableness of any expenses, which includes court costs and attorneys' fees. The Association is not required to indemnify any person for unreasonable expenses.

The Association shall not indemnify a person or former trustee, officer, employee or agent if he/she is found liable to the Association, or if he/she is otherwise held liable for:

1. a breach of the trustee's, officer's employee's or agent's duty or loyalty to the Association or its members;
2. an act or omission not in good faith, or one that is the result of intentional misconduct or a knowing violation of the law;
3. a transaction from which a trustee, officer, employee or agent received an improper benefit, whether or not the benefit resulted from an action taken within the scope of the trustee's, officer's, employee's or agent's office; or
4. an act or omission for which the liability of a trustee, officer, employee or agent is expressly provided by statute. A person shall be deemed to have been found liable with respect to any claim, issue, or matter only

after the person has been so adjudged by a court of competent jurisdiction and after exhaustion of all appeals from that judgment.

Any indemnification of a trustee, officer, employee or agent in accordance with this section shall be reported in writing to the members of the Association within the 12 month period immediately following the date of the indemnification.

## APPROVED

### RESOLUTION NO. 1 PERTAINING TO CME

**CREDITS:** The House of Delegates goes on record in support of calling upon the pharmaceutical industry to actively seek AOA, as well as AMA, approval of CME materials which they provide to physicians; and further goes on record in support of forwarding this resolution to the Texas Pharmaceutical Manufacturer's Association and to the AOA House of Delegates for consideration and adoption.

## APPROVED AS AMENDED

### RESOLUTION NO. 2 PERTAINING TO THE PATIENT

**PROTECTION ACT:** The House of Delegates goes on record in support of the patient and physician safeguards included in the American Medical Association's Patient Protection Act; and further goes on record in support of forwarding this resolution to the AOA House of Delegates for its consideration and adoption.

## APPROVED

### RESOLUTION NO. 3 PERTAINING TO POINT-OF-SERVICE PLANS AND THE FREEDOM TO CHOOSE

The House of Delegates goes on record in support of legislation on the state and federal level that would require all managed health care plans to offer their enrollees the option of point-of-service plans; and further goes on record in support of forwarding this resolution to the AOA House of Delegates for its consideration and adoption.

## APPROVED

### RESOLUTION NO. 4 PERTAINING TO THE DEATH PENALTY AND LETHAL INJECTIONS:

The House of Delegates goes on record in opposition to osteopathic physicians being required to administer lethal injections to carry out death sentences in Texas penal facilities; and further goes on record in support of forwarding this resolution to the AOA House of Delegates for its consideration and possible adoption of a national policy against osteopathic physicians being required to administer lethal injections.

## APPROVED AS AMENDED

### RESOLUTION NO. 5 PERTAINING TO PATIENT ACCESS IN RURAL AREAS:

The House of Delegates goes on record in support of legislation on the state and federal level that would require all managed health care plans to allow their enrollees, who live more than 20 miles from the nearest network physician or hospital, to utilize a physician or hospital of their choice at no extra charge; and further goes on record in support of forwarding this resolution to the AOA House of Delegates for its consideration and adoption.

## APPROVED AS AMENDED

**RESOLUTION NO. 6 PERTAINING TO OSTEOPATHS ALLOPATHS:** The House of Delegates goes on record encouraging all medical publications to avoid the use of the term "osteopath," unless it is used in conjunction with the term "allopath," in order to help avoid public confusion regarding osteopathic physicians; and further goes on record in support of forwarding this resolution to the AOA House of Delegates for its consideration and adoption.

**APPROVED**

**RESOLUTION NO. 7 PERTAINING TO THE HIGH COST OF MEDICAL EDUCATION:**

**WITHDRAWN**

**RESOLUTION NO. 8 PERTAINING TO THE SELECTION PROCESS FOR NEW OSTEOPATHIC MEDICAL STUDENTS FOR THE UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER/TEXAS COLLEGE OF OSTEOPATHIC MEDICINE:**

**DISAPPROVED**

**RESOLUTION NO. 9 PERTAINING TO OSTEOPATHIC FAMILY PRACTICE TRAINING:**

**DISAPPROVED**

**RESOLUTION NO. 10 PERTAINING TO TOMA COGNITION OF SENATOR CARLOS TRUAN:** The House of Delegates goes on record expressing recognition and gratitude to Senator Carlos Truan of Corpus Christi, sponsor and sponsor of Senate Bill 965, for his dedication and support in the passage of this important law.

**APPROVED**

**RESOLUTION NO. 11 PERTAINING TO TOMA COGNITION OF REPRESENTATIVE JACK HARRIS:** The House of Delegates goes on record expressing recognition and gratitude to Representative Jack Harris of Portland, the House sponsor of Senate Bill 965, for his dedication and support in the passage of this important law.

**APPROVED**

**RESOLUTION NO. 12 PERTAINING TO TOMA DISTRICT V SERVING AS THE HOST DISTRICT:** The House of Delegates goes on record expressing sincere appreciation to TOMA District V for serving as the host district for the 1995 TOMA convention.

**APPROVED**

In other action, 1990 TOMA Resolutions reviewed under Sunset Rule resulted in the following:

Deleted were Osteopathic Commitment to Rural Texas (No. 90-08); Health Care Financing (No. 90-15); Medical Health Insurance - Cost/Benefit Ratio (No. 90-16); Medicare-Intermediary Denial Letters (No. 90-30); Medicare-Out-of-Town Coverage (No. 90-33); Medicare-Assignment (No. 90-34); Medicare-Appeals (No. 90-36); and CME Credit for State House of Delegates Participation (No. 90-39).

Reaffirmed were Medical Staff Privileges (No. 90-01); Physician Office Laboratories (No. 90-02); Medical Waste Management (No. 90-03); CME-Osteopathic Orientation (No. 90-05); Osteopathic Training (No. 90-10); Osteopathic Curriculum (No. 90-11); Osteopathic Health Insurance Choice of Physician (No. 90-12); Medical Ethics (No. 90-18); Post Graduate Stipends (No. 90-20); Osteopathic Political Aspirations (No. 90-24); CME-Continuity (No. 90-25); Medicare Screens (No. 90-28); Peer

Review (No. 90-29); Resource-Board Relative Value Scale - OMT (No. 90-32); Generic Substitution (No. 90-35); Osteopathic Manipulative Treatment - Insurance Prejudices (No. 90-37); and Use of Animals in Medical Research (No. 90-38).

A revision was made to the UNT Board of Regents (No. 90-22), whereby "BC/BS" was deleted from the text.

The House of Delegates also reviewed the following completed TOMA resolutions which, due to completion, are hereby deleted: CLIA Regulations (No. 92-01); Medicare Rules (No. 92-06); Relocation of the TOMA Office to Austin, Texas (No. 92-10); Managed Health Care Plans (No. 93-01); Full Status TOMA Membership for Residents (No. 93-08); Host District - (should only run one year in directory) (No. 93-09); Diana L. Finley - (should only run one year in directory) (No. 93-10); Dana L. Tidwell - (should only run one year in directory) (No. 93-11); Legislative OMT (No. 93-19); Host District - (should only run one year in directory) (No. 94-09); and Location of TOMA Headquarters (No. 94-11).

New officers elected by the House are listed elsewhere in this issue, along with department and committee appointments of President William D. Hospers, D.O.

The House of Delegates observed a minute of silence for the following members, family and friends who died during the past year: Gordon L. Allen, D.O., Mrs. Bessanne Anderson; Gladys Auten, D.O.; William H. Badger, D.O.; John H. Burnett, D.O.; John J. Cahill, Jr., D.O.; Joseph S. Carpenter, D.O.; James W. Coldnow, D.O.; Joseph M. Dubin, D.O.; William A. Flannery, D.O.; Lawrence B. Greif, D.O.; Mrs. Sharon A. Johnson; Seaborn E. Jones, D.O.; James H. Miles, D.O.; George F. Pease, D.O.; Roy L. Rhodes, D.O.; Carolyn H. Roberts, D.O.; Stephen A. Stern, D.O.; Harvey G. Swords, D.O.; and Thomas R. Turner, D.O.

The following physicians were recognized for their service in the TOMA House of Delegates:

5 YEARS: George M. Cole, D.O., Joseph A. DelPrincipe, D.O., Richard D. Saunders, D.O.

10 YEARS: Kenneth S. Bayles, D.O., Brian G. Knight, D.O., Scott C. Taylor, D.O., Bill V. Way, D.O.

11 YEARS: James E. Froelich, III, D.O., Randall W. Rodgers, D.O., Arthur J. Speece, III, D.O.

12 YEARS: Mark A. Baker, D.O., Bryce D. Beyer, D.O., Rodney M. Wiseman, D.O.

13 YEARS: David M. Beyer, D.O., R. Greg Maul, D.O., Jerry E. Smola, D.O.

14 YEARS: Nelda N. Cuniff, D.O.

15 YEARS: John L. Mohney, D.O.

16 YEARS: William D. Hospers, D.O., Joseph Montgomery-Davis, D.O.

18 YEARS: John R. Peckham, D.O., Robert L. Peters, Jr., D.O.

19 YEARS: Donald F. Fedral, D.O.

22 YEARS: Robert G. Maul, D.O.

23 YEARS: Jerome L. Armbruster, D.O., Bill H. Puryear, D.O., Arthur S. Wiley, D.O.

24 YEARS: Frank J. Bradley, D.O.

25 YEARS: John J. Cegelski, Jr., D.O.

27 YEARS: Donald M. Peterson, D.O.

29 YEARS: William R. Jenkins, D.O.

30 YEARS: David R. Armbruster, D.O.



# Merilyn J. Richards is New ATOMA President



Mrs. Merilyn Richards, ATOMA President 95-96

The Colonnade Room of the Grand Kempinski Hotel was the scene for the ATOMA President's Installation and Luncheon, which took place Friday, June 16, during TOMA's annual convention in Dallas.

Special guest was Mrs. Sue Emmans of Selah, Washington, current President of the Auxiliary to the American Osteopathic Association.

During the event, the gavel was passed to Mrs. Merilyn J. Richards of Fort Worth, who assumed the ATOMA Presidency for 1995-96. Mrs. Richards succeeds Deidre L. Froelich, Ph.D., of Bonham. (Editor's note: a complete listing of the new ATOMA officers can be found in this issue under ATOMA News.)

The following is the acceptance speech delivered by Mrs. Richards following her installation as ATOMA President:

*Thank you for being here today! It is an honor to serve as President of the Auxiliary to the Texas Osteopathic Medical Association for the 1995-96 year. It is also an awesome challenge, one that has been so capably met by a cadre of capable and talented women who have preceded me as president.*

*I pledge that I will endeavor to serve the osteopathic profession as President of ATOMA, faithfully and to the best of my ability. I am grateful to the ladies who are to serve on my board - it is they who will truly make this a great year!*

*It has been wonderful having Sue Emmans, our National President, visit with us and I consider it an honor to have had her serve as our installing officer. Sue has brought us news of what is happening at the national level, what innovative developments are now in place, or soon will be, and some of the proposed changes on the Auxiliary's horizon.*

*Change and the unknown are often scary! It's usually more comfortable to perpetuate the status quo. However, if we do not grow and change, we will surely die!*

*The tree that stands rigid and unbending in the path of strong winds will break or be uprooted and blown aside. How much better to harness the winds, as do the sails of an ocean schooner, to navigate this sea of change and chart a course of our own design, moving forward with speed and determination to a further and greater destination than could have ever been thought possible before the wind came!*

*The Auxiliary supports our osteopathic profession working to make available funds for scholarships, student loans, research, public health resources, legislative awareness and, in these later years, founding the osteopathic national ad campaign, which has taken the profession before the public through the mainstream magazines and are now targeting the HMO and managed care publications to affect those who are making the health care decisions. There are many ATOMA members representing the profession well by community involvement through various volunteer endeavors. We will continue to serve! You've done a great job, Auxiliarians! But, we need more members to carry on this work.*

*It isn't just the AAOA Board who is the Auxiliary; neither is it only the ATOMA Board who makes up the Auxiliary. It is up to each one, individually and collectively, to make this year of growth and success! Take the message back. You Auxiliary is relevant in these changing times. Inspire and motivate the spouses of D.O.s and friends of the profession in your district, to become involved in the Auxiliary and the osteopathic projects. Lend your support through membership at the local, state and the national levels. Mentor those who follow, the S.A.A. in our college. It has been said the "Winners are separated from losers by what they achieve. Losers let it happen - winners make it happen."*

Congratulations to the new ATOMA officers from TOMA!



Deidre Froelich congratulates Merilyn Richards on assuming presidency.



# Dr. Elmer Baum Receives Distinguished Service Award



Elmer C. Baum, D.O., of Austin, was the recipient of the Texas Osteopathic Medical Association's Distinguished Service Award, presented at the President's Banquet on June 17, during TOMA's annual convention in Dallas. The award is the highest honor that TOMA can bestow upon an osteopathic physician in recognition of outstanding service and contribution to the osteopathic profession in Texas.

A 1934 graduate of the University of Health Sciences College of Osteopathic Medicine in Kansas City, Missouri, Dr. Baum practiced for nine years in Uniontown, Kansas, prior to relocating to Austin in 1944. He is a certified family physician and a Fellow of the American College of Osteopathic Family Physicians.

An active TOMA member since 1944, Dr. Baum served as TOMA President from 1952-53 and is currently a Life Member.

His accomplishments concerning the growth of osteopathic education and its public recognition are well known in Texas, and his entire professional life is a testimony to his continuous efforts to shape the future of osteopathic medicine. Dr. Baum has combined his medical

practice with serving as an active political voice in Austin for almost 50 years. He served as chairman of the state's Democratic Party from 1968-1971 and has osteopathically treated five Texas Governors. In addition, Dr. Baum has treated all Texas Lt. Governors from 1950 until 1994, and all Speakers of the Texas House of Representatives from 1949 to 1973.

Dr. Baum's influence in Austin led to obtaining private scholarships for osteopathic medical students in Texas, and he was instrumental in securing general appropriations for the Texas College of Osteopathic Medicine. These steps culminated with TCOM becoming a Texas state college for funding purposes.

In the 1950's, during Dwight D. Eisenhower's tenure as U.S. President, Dr. Baum's influence spread nationally when he, along with several other individuals including a Senator from the State of Missouri, were able to obtain recognition of osteopathic physicians as officers in the draft. His presence and influence was such that he was twice a guest at the White House, per request of President Lyndon B. Johnson.

Clearly, Dr. Baum's dedication has directly led to the success of osteopathic medicine in Texas. In nominating Dr. Baum for this award, it was noted that Dr. Baum "represents the best of the osteopathic tradition of caring for patients and giving back to his profession."

TOMA takes great pride in congratulating Dr. Baum on receiving this well deserved honor. ■

# John Sortore Receives TOMA's Meritorious Service Award



John Sortore (right) accepts Meritorious Service Award from Dr. Frank Mulley, Master of Ceremonies.

Mr. John H. Sortore of Fort Worth was the recipient of the Texas Osteopathic Medical Association's Meritorious Service Award, presented at the President's Banquet on June 17, during the TOMA convention. The award represents the

highest honor that TOMA can bestow upon a non-osteopathic physician in recognition of outstanding accomplishments in scientific, philanthropic or other fields of public service to the osteopathic profession in Texas.

John has devoted his life to the citizens of Texas, beginning with his 12-year career as a police officer in Lubbock, and ending with his positions as Director of Investigations and Hearings at the Texas State Board of Medical Examiners.

In his retirement, John has elected to further serve both the citizens of Texas and the osteopathic profession, acting as TOMA's Field Representative and Coordinator of the Physicians Assistance Program. John also serves as TOMA's representative to the Texas Medical Association's Committee on Physician Health and Rehabilitation, as well as the Trauma Advisory Committee of the Texas Department of Health.

Since joining TOMA in 1985, John has become a highly respected voice of the osteopathic profession and a friend of all osteopathic physicians.

TOMA salutes John for his continuous efforts and dedication to the osteopathic physicians of Texas. ■











# The Frontiers Of Medicine Were Conquered At This Year's Annual Convention

DALLAS — Hundreds of D.O.s from across the state flocked to TOMA's 96th Annual Convention and Scientific Seminar. With 260 physicians and 43 spouses pre-registered for the convention, expectations for this year's convention were high. Those expectations were realized when 72 physicians and 10 spouses registered on-site. This is an all time high of 385 attendees.

To add to the above number, 82 exhibitors from across the country also participated in the convention. These exhibiting companies represented a vast variety of products and services. Additionally, 13 of those companies provided educational grants to TOMA. This allowed TOMA to bring in some exceptional speakers from outside Texas, such as Douglas Vaughn, D.O., from Tulsa, Oklahoma, and Rodney Camp, D.O., from Sacramento, California.

Some new topics were included in this year's CME program, such as a presentation by Ellen Taliaferro, M.D., on "Preventing Violence is Good Medicine" and a presentation by William McIntosh, D.O., on "Stroke Prevention and Management." Also, a computer lab/workshop with eight terminals for hands-on experience was initiated for this year's program. Regina Lee and Velma Jackman from UNTHSC/TCOM taught participants how to "Communicate on the Internet Highway." All of these presentations were very well received.

TOMA was fortunate enough to have AOA President Howard L. Neer, D.O., and his wife, Gloria, participate in the week-long convention festivities. Dr. Neer began early Wednesday morning

with an AOA update to the TOMA House of Delegates and continued as the keynote speaker for the AOA Luncheon on Saturday. He and Gloria participated in many other events including the Sustainer's Party and President's Banquet.

Sue Emmans, AAOA President, and her son Paul, also spent the week with TOMA conventioners. Mrs. Emmans was kept busy as well with her participation in both the TOMA House of Delegates and ATOMA House of Delegates. She was also an important participant in the ATOMA President's Installation and Luncheon. Mrs. Emmans and Paul even had the opportunity to spend Friday afternoon at Six Flags Over Texas. TOMA extended its Texas hospitality to both the Neers and Emmans throughout the week.

Some events highlighting this year's convention included the Sustainer's Party, the Bear Creek Golf Tournament, Six Flags Over Texas and the President's Banquet. This year, TOMA's Sustainers were rounded up and taken by chartered bus to the Circle R Ranch. Many rode horses or took a hay ride, roped a mechanical calf or shot guns while enjoying a Texas barbecue dinner and listening to the music of the *Circle R Playboys*. Past President T. Eugene Zachary, D.O., even got married while he was at the Ranch! He participated in his own shotgun wedding to Miss Trixie, the local lady of the Ranch. Following the wedding, a guest participation rodeo was held. Sustainers and their guests challenged each other in several events such as barrel racing and calf roping. The Ranch was great fun for everyone.

For Family Day, attendees had a choice of either playing in the annual TOMA golf tournament or going to Six Flags. Thirty-one of TOMA's attendees participated in the golf tournament at Bear Creek Golf and Racquet Club and 151 went to Six Flags Over Texas. Both groups had a great afternoon in the Texas sunshine! The big winners of the day by scorecard playoff were Ronald Daniels, D.O., Stephen Daniels, D.O., George Cole, D.O., Linda Cole and Michelle Malloy.


Saturday evening was dedicated to the annual President's Banquet. After eating fabulous food and having bananas foster flambéed in the room, the award presentations began with the recognition of both the incoming and outgoing ATOMA boards (see pages 12 and 29). Following those introductions, TOMA's Meritorious and Distinguished Service Awards were presented (see page 13). Finally, the most important event of the evening — the gavel was handed over to William D. Hoppers, D.O., from T. Eugene Zachary, D.O. (see page 6). After the conclusion of the presentations, the real party began with everyone dancing to the music of *HOTCAKES, America's Band*.

The convention ended on Sunday with a five-hour session on Risk Management.

KUDOS to John R. Bowling, D.O., for another convention well done! The success of this convention proves his commitment to the osteopathic profession. We look forward to having Dr. Bowling continuing to serve on the Annual Convention Committee as Past Chairman.

The 97th Annual Convention and Scientific Seminar will be held in San Antonio on June 6-9, 1996. Mark your calendar now to attend.

## Membership On-The-Move



TOMA publishes an exceptional *Controlled Substance Record Book* to help you keep accurate records of the medications dispensed from your office. You can order a record log for only \$15.00 for TOMA members, and \$20.00 for non-members. For fastest delivery, send your check to: TOMA, One Financial Center, 1717 N. IH 35, Suite 100, Round Rock, TX 78664. We also have the 1995 TOMA *Membership Directory* available for anyone needing an extra copy. To purchase a directory, send \$50.00 to the above address.

# Many Thanks to TOMA's Exhibitors - Without Their Support the Annual Convention and Scientific Seminar Would Not be Possible.

## 96th Annual Convention Exhibitors and Educational Grantors

### Pharmaceutical Exhibitors

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

### Medical Exhibitors

AllerMed Corporation  
Astra Merck  
Boehringer Ingelheim Pharmaceuticals, Inc.  
Central Imaging of Arlington  
Central Pharmaceuticals, Inc.  
Eli Lilly & Company  
EmCare Physician Staffing Services  
Glaxo Wellcome  
Insurance Corporation of America  
InteSol Corporation  
Lederle Laboratories  
Mark T. Bower & Associates  
Micro Four, Inc.  
Mortara Instrument, Inc.  
Osteopathic Health System of Texas  
Searle Pharmaceuticals  
SpectraCell Laboratories, Inc.  
TEI Computers  
The Upjohn Company  
UT Southwestern Epilepsy Center  
W.B. Saunders Company  
Wyeth-Ayerst Laboratories

### Other Exhibitors

AC Medical  
ACS Healthcare Information Systems  
Bayer Corporation  
Bock Pharmacal Company  
Bristol-Myers Squibb  
Center for Rural Health Initiatives  
Ciba Geneva Pharmaceuticals  
Ciradian  
City of Austin  
Coastal Physician Services  
Cornish Medical Electronics  
Curatek Pharmaceuticals  
Departments of the Army and the Air Force - National Guard Bureau  
Don Self & Associates  
Environmental Health Center  
Fisons Pharmaceuticals  
Healthcare Insurance Services, Inc.  
Hoechst-Roussel Pharmaceuticals, Inc.

### I.C. System

International Medical Electronics, Ltd.  
Janssen Pharmaceutica  
Kirkville College of Osteopathic Medicine  
Knoll Pharmaceutical Company  
Marion Merrell Dow  
MBNA Marketing Systems, Inc.  
McNeil Consumer Products Company  
MERCK  
MURO Pharmaceutical, Inc.  
National Heritage Insurance Company  
NewMed Corporation  
Novo Nordisk Pharmaceuticals  
Ortho-McNeil Pharmaceutical  
Ortho Pharmaceutical Corporation  
PARKE-DAVIS  
Pfizer, Inc.  
Physician Manpower Training Commission  
Reed & Carnrick Pharmaceuticals  
Rehabilitation and Workhardening Clinics  
Sandoz Pharmaceuticals Corporation  
Smithkline Beechman Pharmaceuticals  
SMMI/Claims by Computer  
Southwest & Johnson XRay Company  
Texas Medical Association  
Texas Medical Foundation  
Texas State Board of Medical Examiners  
Texas Workers' Compensation Insurance Fund  
The Gladney Center  
Thomas Computer Systems, Inc.  
University of Health Sciences Foundation  
University of Texas Health Science Center - Fort Worth  
University of Texas Health Science Center Foundation  
US Army Medical Department  
Wallace Labs  
Whitby Pharmaceuticals  
X-Ray Sales & Service Company, Inc.

### Educational Grants

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



# In Memoriam

## Charles D. Buckholtz, D.O.

Dr. Charles D. Buckholtz of Jacksonville, passed away April 4, 1995. He was 59 years of age. Funeral services were held April 8 at Thompson Funeral Home Chapel.

Dr. Buckholtz was born in Detroit, Michigan. He earned his D.O. degree in 1967 from the Chicago College of Osteopathic Medicine. He practiced general medicine for several years prior to completing a residency in psychiatry at Austin State School.

Dr. Buckholtz had been associated with Rusk State Hospital, Austin State Hospital and the Texas Department of Criminal Justice. He had served as superintendent of Eastern State Hospital in Venita, Oklahoma, chairman of the Department of Psychiatry at Texas College of Osteopathic Medicine, and had served on the faculties of several universities.

Survivors include his wife, Doris Buckholtz of Jacksonville; three sons and daughters-in-law, Charles Orr and Danelle Buckholtz of Denson Springs, John and Shirley Baker of Naval Air Station in Miramar, California, and Bryan and Julia Baker of Texarkana, Texas; his parents, E.J. and Aileen Buckholtz of Bradenton, Florida; one brother and sister-in-law, Dr. John and Carol Buckholtz of Cadillac, Michigan; one sister and brother-in-law, JoAnn and Fred Martindale of Anna Maria, Florida; two grandchildren, Garrett and Melinda Baker; one aunt, Helene Seay of Sarasota, Florida; nieces, nephews and cousins.

The family suggests memorials to the American Cancer Society, P.O. Box 951, Jacksonville, TX 75766.

## Joseph L. Love, Sr., D.O.

Dr. Joseph Love of Austin, passed away June 23, 1995. He was 85 years of age. Funeral services were held June 26 at Central Christian Church, with burial in Austin Memorial Park Cemetery.

Dr. Love attended Northeast Missouri State University, receiving a B.S. degree in 1932. He concurrently entered Kirksville College of Osteopathic Medicine in 1930, receiving his D.O. degree in 1934. In 1935, Dr. Love entered the graduate program at the University of Texas at Austin, receiving a master's degree in economics in 1937.

Dr. Love practiced in Tyler, Texas, for a brief period before relocating to Austin in 1934, where he practiced until 1988. He was certified in family practice and in bariatrics, and held Certification of Special Proficiency in Osteopathic Manipulative Medicine.

Extremely active in TOMA activities, Dr. Love was the only TOMA President to serve two consecutive terms, from 1944-46. He served as President of the Texas ACGP in 1941 and in 1982. Dr. Love was named by TOMA as General Practitioner of the Year. In addition, he served as a delegate to the American Osteopathic Association from 1936-46; was an active member of TOMA District VII, serving as President in 1938; and was a member of the Board of Trustees of Kirksville College of Osteopathic Medicine from 1961-70.

Dr. Love was also a member of both the Downtown Austin Lion's Club and the Austin Chamber of Commerce for over 50 years. He was a 32nd Degree Mason, Scottish Rite; a Shriner; a member of Central Christian Church in Austin since 1947; and a member of the University Club from 1945-65.

Survivors include his son, Joseph L. Love, Jr.; daughter, Judith Love-Schafer; six grandchildren, James, Stephen, Catherine and David Love, and Tracy and Gina Pyle; and a sister, Eve Spinney Hale.

## Virginia P. Ellis, D.O.

Dr. Virginia Ellis of Granbury, passed away on June 21, 1995. She was 82 years of age. A memorial service was held June 25 at the Acton United Methodist Church in Acton.

The daughter of parents who were osteopathic physicians in Massachusetts, Dr. Ellis attended Kirksville College of Osteopathic Medicine, receiving her D.O. degree in 1936. After private practice as a pediatrician, she joined the Texas College of Osteopathic Medicine in 1972, and created the school's community service program.

Dr. Ellis was a Fellow of the American College of Osteopathic Pediatricians, a professor emeritus of TCOM, a 1983 recipient of the TCOM Founders' Medal and a TOMA life member. She retired in 1985.

In the words of David M. Richards, D.O., President of the University of North Texas Health Science Center at Fort Worth/TCOM, "Dr. Virginia, as she preferred to be known, was a humanitarian who carried out her commitment to others as an osteopathic pediatrician and medical educator.

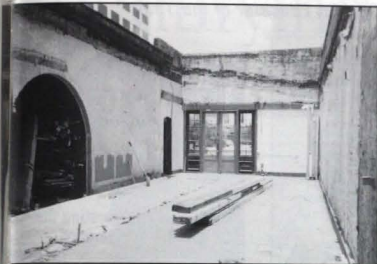
"Dr. Virginia taught and showed by example that a physician has a responsibility to the community. She pioneered the Annual Child Health Clinic and Conference in Fort Worth and founded a free clinic in the Bethlehem Community Center on Fort Worth's South Side to provide low income residents with preventive medical care. In 1985, the clinic was renamed the 'Virginia Ellis Clinic' in her honor. She also was a catalytic force for a group of community organizations that are too numerous to list here."

Survivors include her husband, Noel Ellis, D.O.; and one son, Greg Ellis.

The family suggests that donations be made to the organ fund at Acton United Methodist Church, P.O. Box 520, Granbury, TX 76048.



# OMA Building Update



Renovations for TOMA's new state headquarters are progressing nicely. Beautiful stone and brick walls have been discovered under many layers of plaster and sheetrock. Hidden windows and arches have been uncovered as well. The roof has been completely removed as planned. Each day gets easier to visualize the floor plan in this structure as OMA's new State Office.

If you would like to help with the cost of these renovations and become a "Texas Star," please call Janet Dunkle at the OMA office at 800/444-8662. TOMA needs and appreciates our support!

# TEXAS STARS

The following people have made pledges or have contributed to TOMA's Building Fund Campaign. These people are now known as "Texas Stars" because of their commitment to the osteopathic profession.

Bruce Addison, D.O.  
Richard Anderson, D.O.  
Aus-Tex Printing and Mailing  
ATOMA District II  
Mark Baker, D.O.  
Rita Baker  
Elmer Baum, D.O.  
Kenneth Bayles, D.O.  
James Beard, D.O.  
Terry Boucher  
John Bowling, D.O.  
Daniel Boyle, D.O.  
Frank Bradley, D.O.  
Joanne Bradley  
Robert Breckenridge, D.O.  
John Brenner, D.O.  
Mary Burnett, D.O.  
Jeffrey Butts, D.O.  
Catherine Carlton, D.O.  
John Cegelski, D.O.  
William Clark, D.O.  
George Cole, D.O.  
Samuel Coleridge, D.O.  
Robert Collop, D.O.  
Robert Chouteau, D.O.  
Nelda Cuniff-Isenberg, D.O.  
B. J. Czewski  
Jim Czewski, D.O.  
William Dean  
Joseph Delprincipe, D.O.  
Gergory Dott, D.O.  
Janet Dunkle  
Braldey Eames, D.O.  
Carl Everett, D.O.  
Al Faigin, D.O.  
Gerald Flanagan, D.O.  
Richard Friedman, D.O.  
James Froelich, D.O.  
Mark Gittings, D.O.  
Richard Hall, D.O.  
Tony Hedges, D.O.  
Bret Holland, D.O.  
Bobby Howard, D.O.  
Lewis Isenberg  
Jake Jacobson  
Constance Jenkins, D.O.  
William R. Jenkins, D.O.  
Daniel Jensen  
Elva Keilers, D.O.  
Royce Keilers, D.O.  
Brian Knight, D.O.  
Harold Lewis, D.O.  
A. Ray Lewis, D.O.

James Matthews, D.O.  
R. Greg Maul, D.O.  
Robert G. Maul, D.O.  
Jack McCarty, D.O.  
Carl Mitten, D.O.  
Lois Mitten  
John Mobney, D.O.  
Joseph Montgomery-Davis, D.O.  
Ray Morrison, D.O.  
Elizabeth Palmarozzi, D.O.  
Robert Peters, D.O.  
Ruby Peters  
Wilma Peterson  
Donald Peterson, D.O.  
Bill Puryear, D.O.  
David Randall, D.O.  
Jeffrey Rettig, D.O.  
David Richards, D.O.  
John Riggs, D.O.  
Peggy Rodgers  
Randall Rodgers, D.O.  
Mario Sanchez, D.O.  
Richard Saunders, D.O.  
John Sawtelle, D.O.  
Amy Saylak  
Daniel Saylak, D.O.  
Hubert Scadron, D.O.  
A. Duane Selman, D.O.  
T. R. Sharp, D.O.  
Rick Siewart, D.O.  
George Smith, D.O.  
Jerry Smola, D.O.  
John Sortore  
Arthur J. Speece, D.O.  
Dodie Speece  
Ray Stokes  
TCOM Student Auxiliary Assoc.  
J. Ross Tanner, D.O.  
TOMA District II  
TOMA District III  
TOMA District XV  
Monte Troutman, D.O.  
Bill V. Way, D.O.  
Arthur Wiley, D.O.  
Peter Wiltse, D.O.  
Marie Wiseman  
Rodney Wiseman, D.O.  
James Woodruff, D.O.  
Capt. Benjamin Young, D.O.  
Nancy Zachary  
T. Eugene Zachary, D.O.  
Irvin Zeiler, D.O.

If you would like to contribute to the Building Fund and become a "Texas Star," call Janet Dunkle at 800/444-8662.



Building Fund donors receive their "Texas Star" during the 1995 TOMA House of Delegates.

# From the National Osteopathic Foundation

*Dr. Eileen DiGiovanna Named NOF/AOA Educator of the Year*



*Eileen DiGiovanna, D.O., 1995 Educator of the Year*

Eileen DiGiovanna, D.O., F.A.A.O., Professor and Chair of the Department of Osteopathic Manipulative Medicine at the New York College of Osteopathic Medicine (NYCOM), has been named 1995 Educator of the Year by the National Osteopathic Foundation (NOF) and the American Osteopathic Association. Dr. DiGiovanna accepted the award during a ceremony at the AOA House of Delegates meeting, July 28, at the Chicago Downtown Marriott Hotel.

Dr. DiGiovanna was nominated by the dean of NYCOM, Dr. Stanley Schiowitz, in recognition of her contributions to osteopathic medicine and education, and to public health. The award is given annually to one outstanding educator in osteopathic medicine who exemplifies and encourages the principles of osteopathic medicine. She is the 13th recipient of the NOF/AOA Educator of the Year Award.

In addition to her responsibilities as Department Professor and Chair, Dr. DiGiovanna is Associate Professor for Family Practice at NYCOM and Assistant Dean for Student Affairs. She also directs NYCOM's Stress Management Program and is the

immediate past president of the American Academy of Osteopathy.

During the 18 years of Dr. DiGiovanna's affiliation with NYCOM, she has written extensively, authoring several published articles and co-authoring the nationally recognized textbook, *An Osteopathic Approach to Diagnosis and Treatment*. Dr. DiGiovanna is certified by the American College of General Practitioners in Osteopathic Medicine and Surgery, as well as the American Osteopathic Board of the American Academy of Osteopathy. She also maintains a part-time practice, both in family medicine as well as osteopathic manipulative medicine, at NYCOM's on-campus health center. She is a graduate of Ohio State University and the Chicago College of Osteopathic Medicine, and served her internship at the Doctor's Hospital in Columbus, Ohio.

Educator of the Year recipients are selected by one of the nation's colleges of osteopathic medicine (on a rotating basis), in conjunction with the NOF Osteopathic Progress Fund & Seals Committee comprised of osteopathic physicians, osteopathic educators and AOA representatives. ■



## Help NOF By Celebrating the AOA's 100th Anniversary

In 1892, Dr. Andrew Taylor Still founded the American School of Osteopathy in Kirksville, Missouri. Shortly thereafter, the AOA was formed. Now, almost 100 years later, that organization continues to serve thriving osteopathic medical professionals. To help the AOA celebrate its upcoming 100th birthday, the NOF is offering notecards and two posters, including limited collector's edition, honoring the history of osteopathic medicine through NOF seals.

The posters and notecards, bearing the NOF seal commemorating the AOA's 100th anniversary, made their debut at the 1995 AOA House of Delegates meeting in Chicago, July 27-29. The posters may be purchased individually while the notecards will be available in sets of 10 and 25. To receive an order form, interested parties may call NOF headquarters at 404-705-9999 or write to NOF, 5775 Peachtree-Dunwoody Road, Suite 500-G, Atlanta, GA 3034. Proceeds from the sale of these commemorative items will go to support osteopathic medical education and research.

"As the philanthropic affiliate of the AOA, we have shared a mission to advance the practice of osteopathic medicine for almost 50 years. It seems fitting that we help the AOA celebrate its centennial with a project that will also help fulfill this ongoing shared mission," said Mike Levin, NOF Executive Director.

Since 1949, NOF has been instrumental in fostering a better understanding of osteopathic theory and practice. NOF provides loans and scholarships to osteopathic medical students and administers research grant programs for scientific and clinical osteopathic research.

# Identifying and Treating Summer Depression



Irwin Schussler, D.O., F.A.C.N.

During the night, summer months, it's common to feel hot, tired and sweaty. Some of us may even feel depressed.

Depressed? Not only happens during the dark, cold months, when we are often confined indoors, right?

Not necessarily. Depression can strike at any time. Summer is fraught with its own stresses that may trigger depression.

"People often assume they are going to be depressed during one part of the year, and well during another part, and that's not necessarily true," said Irwin Schussler, D.O., F.A.C.N., practicing psychiatrist and medical director of the New Choices psychiatric unit at Osteopathic Medical Center of Texas in Fort Worth. "It's important that people realize they can be depressed during what appear to be happy and bountiful times, and that they need to recognize the sources so they can do something about it."

## What Are These Summer Stressors?

First, more family members are typically home during the summer. Children who attend school or college during the rest of the year are home for vacation, no longer occupied with schoolwork or extracurricular activities. Parents and children alike may feel unprepared to handle this change.

Second, we are expected to be more sociable during the summer, with its cookouts, picnics, family reunions and vacations, and may feel unprepared for increased social contact, particularly if we're forced to spend time with people we don't like. We also may fear physical exertion. While winter allows us the option of snuggling our body with darker, heavier clothes, summer calls for swimwear, shorts and lighter clothing.

Third, recent college graduates may be faced with struggling to find a job, and, in the process, may relinquish some of their independence by moving in with their parents. They no longer have an organized schedule of classes, and with no readily available "next

step" in sight, they may feel lost and unprepared for what lies ahead. This also is stressful for parents, who must adjust to the return of an adult child.

Finally, people may feel their failure to adapt to these changes is a confirmation of suspected inadequacies, physical or social, and their self-worth may suffer. In addition, people who suffer from depression in the winter but think their condition will improve once summer arrives may be setting themselves up for further disappointment.

"We often see a surge of depression in the summer," Dr. Schussler explained, "because people get through the dark winter months, anticipating that they will benefit from the bright summer months, and this is not always the case."

## How To Recognize Summer Depression

Depression affects an estimated six percent of the American population, and strikes more women than men, particularly women who have reached middle age. Like many other illnesses, it can be treated effectively and is often curable. But before it can be treated and cured, a person has to recognize that he or she is experiencing the symptoms of depression.

A depressed person usually experiences many or most of the following symptoms: feeling tired, despite adequate rest; being unable to sleep at night; feeling helpless or hopeless without reason; feeling overwhelmed; and unable to concentrate or make decisions. Low-grade, chronic headaches may feel as if a band is around the head; there are vague aches and pains that have no real explanation; decreased interest in sex; decreased or increased appetite; weight loss or weight gain; irritability; uncontrollable crying; lack of enthusiasm; feeling unwanted, sinful, guilty or worthless; feeling that life is no longer worth living.

## How To Relieve Summer Depression

The first step, Dr. Schussler explained, is "to accept the possibility that this may not be a physical illness but may result from the psychosocial stressors in your life." People often seek help for physical symptoms when they are really experiencing the symptoms of depression, like headaches or chronic fatigue.

## Seeking Help Is Important

"Unfortunately, many people refuse to seek help because they don't want to be a burden to their family and don't want to take away from the family's vacation time," said Dr. Schussler. "This only makes the situation worse, because what could have been a minor or easily handled outpatient experience becomes either a lengthy inpatient, or a very intense outpatient, experience."

"If you suspect you are depressed, you can begin by calling your family doctor for an evaluation. It is not necessary to call a psychiatrist immediately."

After an evaluation, if your family doctor feels you are suffering from depression, he or she may prescribe an appropriate medication or may refer you to a psychiatrist or therapist.

Treatment often involves medication, which Dr. Schussler noted, has proved to be a godsend for this illness, and may represent one of the most significant advances in psychiatric medicine, as well as medicine in general, of the 20th century.

"I believe the most important aspect of drug therapy is to enable a patient to get into counseling or psychotherapy," Dr. Schussler said. "I am therapeutically minded when dealing with my patients. If one of my patients is receiving medication, he or she will receive therapy simultaneously. Medicine enables patients to get to the point where they can handle working with a doctor in a therapeutic interaction."

People who suspect they have depression, Dr. Schussler said, must not be afraid of getting help. Depression, even summer depression, is an illness like any other that can be diagnosed, treated and cured.

"Most people are helped with reasonable, brief therapeutic sessions that are directive and supportive in nature," he added. "The prime thing a person can do is accept the possibility that he or she may be suffering from depression, no matter the time of year."

*Irwin Schussler, D.O., F.A.C.N., practices psychiatry at Psychiatric Consultants of Fort Worth, P.A., located at 3704 Mattison Avenue in Fort Worth's cultural district. Medical director of the New Choices psychiatric unit at Osteopathic Medical Center of Texas, Dr. Schussler is board certified in Adult/General psychiatry, Child/Adolescent psychiatry and human sexual medicine.*



# What's Happening In Washington, D.C.

**\* \$1.4 Trillion in Cuts.** The Republican Fiscal 1996 Budget Plan was approved by the House on May 18. It includes \$1.4 trillion in spending cuts and \$350 billion in tax reductions over the next seven years.

**\* Major Spending Targets.** The Medicare and Medicaid programs are targeted for the biggest cuts under the House Plan. The estimated annual growth rate of each of these programs would be cut in half under the Plan.

**\* Only a Guideline.** The House Budget Plan is only a guideline for specific budget bills that will come before the House this year. The Plan itself does not go to the White House.

**\* The Veto Threat.** The White House has confirmed that the cutbacks in the Plan, if passed by the Congress, will be vetoed unless the huge tax reduction is eliminated and the deep cuts in Medicare, Medicaid and education are reduced.

**\* The Senate Position.** On the same day the House approved its budget resolution, the Senate passed its own budget resolution. The Senate resolution contained no tax cuts, but stated that up to \$170 billion of tax cuts may be considered in the future.

**\* The Extra \$170 Billion.** The Senate's potential tax cut number comes from a recent report of the Congressional Budget Office which indicated that balancing the federal budget by the year 2002 may save the government \$170 billion by reducing interest rates and strengthening the economy. In response to this report, nearly every major player has expressed an idea for spending the projected savings.

**\* Save Social Security?** A package to save the Social Security program was recently introduced by Senators Kerry and Simpson. Without some reform, Social Security is expected to go broke by the year 2031. Among other things, the proposal would allow workers to divert a portion of their FICA withholdings to personally managed investment accounts, would reduce the annual percentage increase in benefits, and would mandate that a portion of Social Security trust funds be invested in equity investments.

**\* New Tax Commission.** House and Senate Republican leaders have established a new commission to study the total reform of the federal tax system. Jack Kemp has been appointed to head the commission. The findings and recommendations of the commission are expected to be an important part of the 1996 Presidential election debate.

**\* Kemp on Tax Reform.** He believes comprehensive tax reform is needed, but will not support any proposal that fails to create a positive tax environment for lower-income people. He believes a flat tax would generate a boost in capital investment, which in turn would benefit lower-income people.

**\* Another Flat Tax Proposal.** A new flat tax proposal has been introduced by Senator Arlen Specter, a Presidential candidate. This new proposal would set the flat rate slightly higher than the 17 percent rate proposed by Senator Armer. The new proposal would allow a deduction for interest on residential mortgages of up to \$100,000 and would retain a limited deduction for charitable contributions. The Armer proposal would eliminate both charitable contribution deductions and residential mortgage interest deductions.

**\* Clinton on the Flat Tax.** President Clinton recently stated that a flat tax would benefit only those earning \$200,000 or more per year.

**\* Eliminate the Estate Tax?** A key element in the flat tax proposals is the elimination of the estate tax. Proponents emphasize that this change will facilitate the transition of privately-owned businesses from one generation to the next. Senator Kennedy and other liberal members of the Congress claim that the elimination of the estate tax would enhance the polarization of the nation's rich and poor classes by allowing more wealth to stay in a limited number of families.

## SHOULD YOU HAVE A SUPPLEMENTAL RETIREMENT PLAN?

Retirement planning is the number one financial concern of many individuals. Am I going to have enough? Will I outlive my financial resources? Is a retirement free of financial worries even possible? No generation has been more concerned about these questions than the life-style conscious baby boomers, the first of whom are just hitting their late forties.

For many the solution is a special supplemental retirement plan provided by the employer. The company's regular retirement plan is just too watered down to do the job. For decades, companies have recognized the value of individually-tailored retirement arrangements to recruit and retain key people.

The key challenges in every supplemental retirement plan are to properly structure the plan and to wisely fund the plan. If you would like more information on this issue, give us a call.

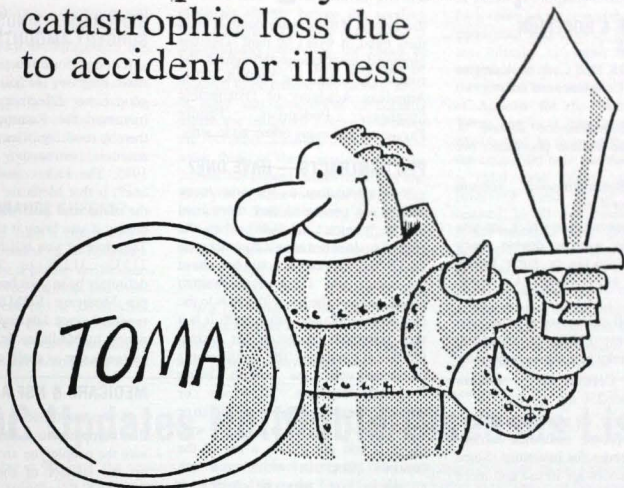
*The above information was provided by Dean, Jacobs, Financial Services, Fort Worth, Texas.*

## Cranial Academy Relocates

Please note the new address of the Cranial Academy, as follows:

8606 Allisonville Road, Suite 130  
Indianapolis, Indiana 46250  
Phone 317-594-0411; Fax 317-594-0451

# How to protect your future from catastrophic loss due to accident or illness



## HEALTH INSURANCE - A Strategy For The '90s

The high cost, no guarantee system of health insurance coverage is an enemy that is battling ALL small employers, especially physicians.

Although a total victory over these problems may still be far away, TOMA has discovered a "knight in shining armor" for its members who can help shield the frustrations that managing health insurance (or the lack of) can cause.

TOMA has appointed DEAN, JACOBSON FINANCIAL SERVICES to battle the complexities of the health insurance environment for you. Insured through CNA Insurance Company (an A++ Excellent rated company with a long, successful record in the accident and health business) the TOMA plan offers superior Major Medical coverage to its members at very competitive rates.

So, regardless of your current situation with health coverage, call DEAN, JACOBSON FINANCIAL SERVICES to help you protect your future!

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

### DEAN, JACOBSON FINANCIAL SERVICES

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

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

# Self's Tips & Tidings

Don Self & Associates

## CELESTONE & ROCEPHIN INJECTIONS

The 1995 HCPCS Code book deletes code J0700 (Celestone) and creates two new codes:

J0702 Betamethasone acetate & betamethasone sodium phosphate, per 3 mg

J0704 Betamethasone sodium phosphate, per 4 mg

Since we are not sure which one you use, you may want to double check with your physician or nurse before providing any more Celestone injections.

We are still seeing some physicians and clinics use J3490 for Rocephin. Code J0696 may be more appropriate:

J0696 Ceftriaxone sodium (Rocephin) per 250 mg

Later this year, we may also expect to start seeing private insurance carriers accepting J codes for injections. Since the HCPCS codes are in use and more than 140 private carriers now request that you file electronically, the most accurate means of reporting is by using HCPCS J codes. When we identify a carrier accepting them, we will publish the fact.

## ONE MORE TIME ... AVOID DME

Physicians throughout the country are finding out the headaches associated with retail supplies. Per HCFA and Medicare, very few physician offices (regardless of specialty) are allowed to bill for Durable Medical Equipment out of their office. If you have a patient come in with a broken leg and hobbles out of your office, you had better either LOAN them the crutches or write them a prescription so they can go to a store and buy them. Otherwise, you're giving them away for free. As of January 1, under the Stark II self-referral regulations, physicians are prohibited from referring certain health services, INCLUDING DME. Congress has not been clear in their "intent" of the law, which leaves HCFA running around the tree like a coon dog barking at anything

that moves. If there is any doubt at all in their mind, it won't be paid. This has prompted associations throughout the country, including the MGMA, AOA, American Academy of Osteopathic Surgeons, Podiatrists, Family Physicians and many others up in arms.

## PPO CONTRACTS — HAVE ONE?

It is astounding to see how many claims are processed and discounted due to "contract amounts" when the physician does not have a contract with the PPO. A wise move would be to have the doctor give a list of the written contracts he or she has with PPOs to the insurance clerks and office staff. It is a very common procedure for certain PPOs to reduce the physician's payment with the reason being "reduced contract allowance or amount," even though your physician or IPA has never signed a contract with them. If you don't have a list of the contract plans in which you are enrolled, you may be losing a substantial amount of money.

## DIAGNOSTIC SERVICES

Be careful if you are using a diagnostic service to come to your office for certain diagnostic tests. While the following recommendation will not endear me in the hearts of many diagnostic service personnel, it needs to be said. Recently, we were involved with a Medicare hearing where the physician had been classified as the "Medical Director" of a diagnostic group, and he was oblivious to the fact. To the best of his knowledge, he had never given anyone permission to call him "Medical Director." In fact, we found out that the applications for provider numbers for these services do not even require a physician's signature as the Medical Director. This caused him unwarranted trouble and may, in fact, cost him \$50,000 or more. If these services want to bill for what they do, let them. Don't pay them and then bill Medicare (or anyone else) for the full service. You're only inviting trouble if you do.

## HCFA RAISES SINUS SURGERY AMOUNTS

If you perform functional endoscopic sinus surgeries (FESS), we have some good news. Effective April 1, HCFA increased the Relative Value Unit thereby resulting in increased approved amounts, retroactive to January 1, 1995. The kicker (isn't there always one?) is that Medicare will only adjust the claim and give you the additional money if you bring it to their attention. Therefore, if you bill for codes 31231, 31233, 31235 or 31237, it will definitely be in your best interest to pull the Medicare EOMBs for service rendered since January 1 and request review by Medicare. In some cases, the increases are as much as 35 percent!

## MEDICARE & NSF/ANSI 837

If you are thinking about upgrading that computer to a new system, make sure the people you are talking to bring up the subject of the new National Standard Format or the ANSI 837 Format. If they don't bring it up, the chances are real good that they are not staying on top of the changes you need them to. These two formats will be the RULE as of July 1, 1996, for Medicare claims. Part of the new Medicare Transaction System (you'll be hearing about MTS a lot for the next few years) is the standardization of format. Unfortunately, many of the computers in use by Texas physicians are not "convertible" to the new formats due to one reason or another. This will mean that physicians will be forced to either upgrade their systems or plan to use claims/billing services in 1996. The option of sending paper in 1996 or 1997 is not even a reality, unless the practice is Non-Participating.

## USE MODIFIERS ON PRIVATE

Quite often, we see EOMBs sent us with the question "Why didn't they pay for the visit, when we also did procedure?" Even though you may use a different diagnosis, you still need to use the modifiers, as they can mean the difference of being paid or not.



modifiers 24, 25, 57 and 79 should be used on private carriers as well as Medicare, Medicaid, CHAMPUS, etc. If the carrier still doesn't recognize and for the visit on the same day as a procedure, you are encouraged to file an appeal or request a review of the claim. By not doing so, you may either be costing your practice or you may be losing your patient reimbursement. Making of modifiers, we do not recommend that you use modifier 51 on Medicare claims.

## TURN INSURANCE CHECKS?

Have you ever filed a claim with a carrier correctly, based on an insurance card presented or a phone verification of benefits, received payment and then, months later, received a DEMAND from the carrier for a refund? It happens too often. Perhaps the carrier cashed the check in error, and the patient

was no longer covered on the policy. Maybe the patient was no longer a full time student, or the patient left the employer shortly before the services were rendered. If you are in the habit of automatically refunding the check to the carrier, STOP! You may not be required to give them any money. Keep in mind that assignment of benefits means the insurance carrier is sending the PATIENT'S money to you. It is the same thing as them sending it to the patient, the patient cashes the check and pays you with the cash, and then having the carrier demand money from YOU. If you filed the claim correctly, based on good faith and information believed at the time of service, you may not be liable for refunds.

In a 1974 case, the Supreme Court in Nebraska noted a distinction between mistaken payments made to the insured and mistaken payments made to an

innocent third party creditor of the insured. This applies only to situations in which a third party received payment for a claim and accepted the payment in good faith and without knowledge of the mistake or fraud between the original parties. This same line of thought has been followed by the Court of Appeals for the 14th District of Texas and in a 4th Circuit Court in Mississippi. In three of the four cases, the courts did note that the insurer had a valid case against the insured, involving fraud on the part of the insured. In all four cases, the courts found the third party (physicians and hospitals) were not suspicious to be involved in fraud.

For a complete copy of the above article, contact the Healthcare Financial Management Editor and reference the article written by William Sturm, J.D., in the May, 1995, issues. ■

# CDC Updates Notifiable Diseases List

For the first time in 40 years, the nation's list of notifiable diseases has received a major overhaul by the Centers for Disease Control and Prevention. Ten diseases have been deleted from the list either due to a drop in incidence or because they are too nonspecific to be reported accurately. Those deleted are amebiasis, aseptic meningitis, primary and postinfectious encephalitis, analoma inguinale, unspecified hepatitis, leptospirosis, lymphogranuloma venereum, rheumatic fever and tularemia.

The following reflects the updated list:

AIDS	Hantavirus infection	Poliomyelitis
Anthrax	Hemolytic uremic syndrome	Psittacosis
Botulism	Hepatitis A	Rabies, animal
Brucellosis	Hepatitis B	Rabies, human
Chancroid	Hepatitis, non-A, non-B	Rocky Mountain spotted fever
<i>Chlamydia trachomatis</i> (genital infections)	Invasive group A streptococcal infections	Rubella
Cholera	Legionellosis	Salmonellosis
Coccidioidomycosis (regional surveillance only)	Leprosy	Shigellosis
Congenital rubella syndrome	Lyme disease	<i>Streptococcus pneumoniae</i> (drug-resistant)
Congenital syphilis	Malaria	Syphilis
Cryptosporidiosis	Measles	Tetanus
Diphtheria	Meningococcal infection	Toxic-shock syndrome
<i>Escherichia coli</i> 0157:H7	Mumps	Trichinosis
Gonorrhea	Pertussis	Tuberculosis
<i>Haemophilus influenzae</i>	Plague	Typhoid fever
		Yellow fever

# News From Osteopathic Health System of Texas

## Osteopathic Medical Center of Texas Interns and Residents Age 30 Years in 30 Minutes

New interns and residents at the Osteopathic Medical Center of Texas (OMCT) aged 30 years in 30 minutes on Thursday, June 29. In order to promote greater understanding of and sensitivity to the physical challenges and the special needs of the elderly, as well as eliminate stereotypes about aging, OMCT's new interns and residents experienced the physiological changes of aging while engaging in activities required of a hospitalized patient.

During this gerosensitivity orientation, participants plugged their ears with cotton to reduce hearing; wore yellow glasses to simulate the natural yellowing of eye lenses; spread Vaseline on the glasses to experience the decreased sight clarity caused by cataracts; breathed through a straw to mimic the reduced lung capacity that accompanies aging; and wore gloves to reduce their dexterity. Interns and residents were then asked to go through a series of day-to-day activities to experience the difficulty elderly people have with certain tasks.

Katy Scherger, R.N., geriatric clinical nurse specialist, led the students through the exercise — one that all new OMCT employees also complete during their own orientation.



*Wearing gloves that reduce dexterity and yellow glasses that simulate the natural yellowing of eye lenses that accompanies old age, Richard Werman, D.O., unfastens a hospital gown. OMCT's Interns/Residents gerosensitivity orientation, held June 29, was designed to debunk stereotypes about aging and promote greater understanding and sensitivity to the physical challenges and the special needs of the elderly.*

## \$10,000 OMCT Guild Scholarship Awarded May 8

Cathryn Robbins, who completed her second year at the UNT Health Science Center/TCOM in May, was awarded the



*Farhad Yazdi, D.O., like all of the new OMCT Interns/Residents at the gerosensitivity orientation June 29, "aged 30 years in 30 minutes" and engaged in activities required of a hospitalized patient. Sorting a group of multi-colored pills and filling out a hospital menu were among those activities.*

\$10,000 Osteopathic Medical Center of Texas Guild Scholarship at the health science center's Honors Day Ceremony May 8.

This scholarship is presented every spring at the Honors Day Ceremony, and 1995 marks the fourth year it has been awarded. To qualify for the award, applicants must reside in Tarrant County and must be entering their third year of medical school. Guild member Ray Stokes served as chairperson for this year's selection committee. Other committee members included Guild president Ruth Mustarde and Apple Corps volunteers and Guild members Katherine Beard, Grace Smith and the late Margaret Adams.

Students apply for the scholarship by letter and are also interviewed, explained Ruth Mustarde. "I was very impressed with her," Ruth said of Cathryn. "She was the most forthright, and she had a lot of energy. She is a very good wife and mother as well as a good student."

Cathryn grew up southeast of Dallas in Red Oak and earned a degree in biology from the University of Louisville in Louisville, Kentucky.

Before attending school at the health science center, Cathryn worked for an osteopathic physician, Dr. Laura Hempstead of Hurst, for two and a half years. Working for Dr. Hempstead is what sparked Cathryn's interest in becoming a D.O. "It's what helped me decide to go to medical school," she said.

Today, Cathryn lives in Haslet with her husband, Tom, who is the minister of Haslet United Methodist Church, and their two daughters, Caitlyn and Lindsey. She plans to practice family medicine.

## **John Payne, D.O., Arthur Speece, D.O., and Scott Stoll, D.O., Join OMCT Medical Staff**

John Payne, D.O., Arthur Speece, D.O., and Scott Stoll, D.O., recently joined OMCT's Medical Staff.

**John B. Payne, D.O.**, is a graduate of the United States Military Academy at West Point who received his D.O. degree from the College of Osteopathic Medicine and Surgery in Des Moines, Iowa. He completed his medical/surgical internship at Fitzsimmons Army Medical Center in Aurora, Colorado, and his neurosurgery residency at Thomas Jefferson University Hospital in Philadelphia. He is board certified by the American Board of Neurological Surgery and the American Osteopathic Board of Surgery.

Dr. Payne has had nearly 20 years of medical experience, and has taught at Texas Tech School of Medicine, TCOM and the University of Nevada School of Medicine.

He is a member of numerous professional societies, including the AOA, TOMA, AMA, the American College of Osteopathic Surgeons and the American Association of Osteopathic Neurosurgeons.

**Arthur J. Speece, D.O.**, holds a B.S. in biology and chemistry from North Texas State University and earned his D.O. degree at Kansas City College of Osteopathic Medicine (now known as the University of Health Sciences College of Osteopathic Medicine), in Kansas City, Missouri. He completed both his internship and his anesthesiology residency at Stevens Park Hospital in Dallas, and is certified by the American Osteopathic Board of Anesthesia.

Dr. Speece currently practices anesthesia at Dallas/Fort Worth Medical Center in Grand Prairie, where he is also an assistant trainer of interns and medical students in anesthesiology. In addition, he is a clinical lecturer at the UNT Health Science Center/TCOM.

Dr. Speece is a member of numerous professional societies, including the AOA, TOMA and the American Osteopathic Board of Anesthesia. He was recently elected President-Elect of TOMA and will assume the TOMA presidency in June of 1996.

**Scott T. Stoll, D.O.**, holds a B.S. in psychology from the University of Kentucky, a Ph.D. in physiology from the University of North Texas and a D.O. degree from Texas College of Osteopathic Medicine. He completed his internship at the Osteopathic Medical Center of Texas, and completed his physical medicine and rehabilitation residency in 30 of this year at the University of Kentucky Medical Center in Lexington, Kentucky.

Among Dr. Stoll's awards are predoctoral training grants from the National Institute of Health and osteopathic research fellowships from Burroughs Wellcome. Dr. Stoll is also the recipient of TCOM's Stocketh Award for most outstanding osteopathic graduate in 1990. ■

# **ATOMA News**

*By Merilyn Richards  
ATOMA President*

The Convention is over! What a lovely hotel the Grand Kempinski was; every convenience that we could want was provided, even free transportation to the Galeria!

The TOMA staff did a great job seeing to it that everything ran smoothly, and our accommodations for the ATOMA House of Delegates and Installation Luncheon were comfortable. The food at every event was quite good and, if you weren't at the President's Banquet, you miss the grand production of the evening's dessert, Bananas Foster. Yumm-mmm!

Your 1995-96 ATOMA Board is off to a great start with plans for the year. I am excited to have some "new faces" on the Board and look forward to the new perspective that they will bring. I also am grateful to have some "familiar faces" back on the Board as they can keep us from making old mistakes and keep us on course.

If you have any suggestions or concerns that you would like to share with your ATOMA Board, please write to me, phone me or contact the ATOMA Board member in your area.

President - Merilyn Richards, Fort Worth, 817-927-5857

President-Elect - Shirley Bayles, Dallas, 214-692-6285

Vice President - Dodie Speece, Burleson, 817-447-7816

Recording Secretary - Laurie Lagaly, Fort Worth, 817-731-6049

Treasurer - Mary Eileen DelPrincipe, Arlington, 817-275-2067

Immediate Past President - Deidre Froelich, Bonham, 903-583-4812

Corresponding Secretary - Ruby Peters, Round Rock, 512-255-2281

Parliamentarian - Inez Suderman, Mission, 210-581-1600

Auxiliary News - Peggy Rodgers, Arlington, 817-429-4140

metro  
Annual Report - Tami Prangle, Houston, 713-992-2816;  
Lois Campbell, Houston, 713-643-3981

Funds - Cindy Boucher, Austin, 512-869-7395;

Rita Baker, Fort Worth, 817-732-0287;

B.J. Czewski, Fort Worth, 817-236-1370

Yearbook - Linda Cole, Amarillo, 806-359-4359

Credentials - Elaine Tyler, Lubbock, 806-794-6558

S.A.A. Advisor - Shara Lane, Kennedale, 817-483-9061

Scholarship - Nancy Zachary, Fort Worth, 817-292-4996

Public Relations & Publicity - Christi Rousch, Hurst, 817-268-3306

Historian - Kay Smith, Fort Worth, 817-236-6007

Guild Chairman - Martha Coy, Fort Worth, 817-556-2656

Supply Chairman - Peggy Lewis, Austin, 512-328-4652

Convention Chairman - Chris Wilcox, San Antonio, 210-653-2606

Public Health & Education - Paula Bonchak, Bonham, 903-583-9278

Political Advisory - B.J. Czewski, Fort Worth, 817-236-1370  
S.A.A. President - Beth Boudreaux, Fort Worth, 817-377-8155

For those of you who did not attend the Convention, we certainly missed you! I urge you to make your plans now to be in San Antonio when we visit there next June for the 1996 Convention. ■



# ☆ District Stars ☆

## *News From TOMA/ATOMA District VI*

*By Mrs. Jerry W. (Joy) Smith  
ATOMA District VI President-Elect*

TOMA and ATOMA District VI members met for Sunday Brunch and a meeting on May 21 at Westwood Country Club. The event was hosted by Doug Trainor of Pratt Pharmaceuticals.

The guest speaker, Dr. Jeffrey Brown, who is a well respected Texas board certified endocrinologist, maintained a captive audience throughout his lecture and slide presentation entitled "Update on Treating the Type II Diabetic Patient." Followed by questions from the audience, Dr. Brown shared his personal experiences, insight and treatment of patients diagnosed with this all-encompassing disease so prevalent in our adult population.

Dr. Mort Rubin conducted the general business meeting, and Life Memberships were awarded to Drs. Jack Leach, Robert Springer and Robert Kelley.

New business included indepth discussions regarding the recent purchase of new property by TOMA, located one block from the State Capitol in Austin. With renovation of the building eminent, District VI's vote for project participation is scheduled to take place at the next membership meeting, scheduled for September, 1995. We were honored by the presence of a special guest, Paula Yeamans, TOMA Membership Coordinator, from Austin. Ms. Yeamans may be reached during normal business hours at 800-444-TOMA.

The officers for TOMA and ATOMA District VI are as follows:

### ***TOMA District VI***

President - Morton Rubin, D.O.  
Vice President - Carl Mitten, D.O.  
Secretary - Brian Tobias, D.O.  
Recording Secretary - Larry Pepper, D.O.  
Treasurer - Sharron O'Day, D.O.

### ***ATOMA District VI***

President - Mrs. William H. (Marguerite) Badger;  
713-784-1300  
President-Elect - Mrs. Jerry (Joy) Smith; 713-444-4491  
1st Vice President - Mrs. D.Y. (Lois) Campbell;  
713-643-3981  
2nd Vice President - Mrs. Ralph (Joanna) Love;  
713-286-5606  
Secretary - Mrs. Larry (Sally) Pepper; 713-474-5433  
Treasurer - Mrs. Carl (Lois) Mitten; 713-453-6323

A special summer meeting of ATOMA District VI took place on June 29 at Luby's Cafeteria on the Gulf Freeway.

Special guests included Dr. and Mrs. Carl Mitten's twin grandsons and a granddaughter.

Our President mailed 62 invitations. Only four officers and four guests were in attendance at this meeting. District, state and national auxiliaries all suffer from this problem. We hope for better attendance at the September meeting.

I would like to make a few comments about R.S.V.P. It is so helpful, when planning activities, if members would please take the time to reply. We hope the osteopathic family will stick together and be better informed through the sharing of ideas and concerns. Please make a difference!

Hope to see you at the September meeting!

## **Daniel L. Schmidt, D.O., Earns Certification of Special Proficiency in Osteopathic Manipulative Medicine**

The American Osteopathic Association, upon the recommendation of its Bureau for Osteopathic Specialists and the American Osteopathic Board of Special Proficiency in Osteopathic Manipulative Medicine (AOBSPOMM), has approved Certification of Special Proficiency in Osteopathic Manipulative Medicine (CSP-OMM) for Daniel L. Schmidt, D.O. Dr. Schmidt is one of 210 osteopathic physician nationwide who currently holds this status. He completed the board examinations November 13, 1994, during the AOA's Annual Convention in San Francisco, California.

Also certified in family practice, Dr. Schmidt is currently in private practice in Pearsall. After receiving his Bachelor's Degree in Zoology in 1968 from Northeast Missouri State University, he earned his D.O. degree from Kirksville College of Osteopathic Medicine in 1972. He then finished a one-year rotating internship at Stevens Park Osteopathic Hospital in Dallas (renamed Dallas Family Hospital).

Dr. Schmidt's professional affiliations include memberships in the AOA, the American Academy of Osteopathy (AAO), Texas Osteopathic Medical Association, the Texas Medical Association and the American College of Osteopathic Family Physicians. Additionally, Dr. Schmidt serves his community and profession as an Examiner for the Texas Disability Commission, Senior Aviation Medical Examiner, Physician for the Frio County Detention Center, Chief of Staff and Medicine at Frio Hospital and as a member of the Regional Review Committee for the Texas Medical Foundation.

Established in 1990, the AOBSPOMM is a certifying board of the AOA. Its members are nominated from the certified members of the AAO by the Board of Governors of the AAO and are elected by the Board of Trustees of the AOA. The examination process of the AOBSPOMM affords each candidate the opportunity to demonstrate his or her special proficiency in an area of practice. This is accomplished through the successful completion of written, oral and practical examinations. Self-selected case studies from the individual's private practice form the basis of the oral examination.

# News From the Texas Department of Human Services

OMA has received communication from Irma C. Bermea, Deputy Commissioner, Client Self-Support Services, of the Texas Department of Human Services, regarding retroactive Medicaid coverage for children.

Specifically, DHS is currently providing retroactive Medicaid coverage and retroactive payment of Medicaid reimbursable services to children who:

- have a date of birth between October 1, 1986 and August 31, 1989 or

- October 1, 1991, and August 31, 1994; and

- were receiving Medicaid in the month of their first or sixth birthday and subsequent months; and

- have unpaid medical bills for months after their first or sixth birthday.

Households must provide proof of the unpaid medical bills. It may be requesting this proof from their Medicaid provider. If DHS provides retroactive coverage for a child described above, providers must use the usual claim submission process. Claims must be received by NHC within 90 days of the date the coverage is provided.

For children described above whose Medicaid coverage was previously provided and has been on file for more than 90 days, DHS will require that the person acting on the child's behalf

- Obtain an appropriate claim form completed by the provider, and
- send the claim form to DHS.

This special process applies only to retroactive claims processing for these children. DHS will send a letter to the person acting in the child's behalf. The letter will include instructions for obtaining the claim form as well as information for the provider.

The procedures described above will continue through August 31, 1995. ■

# Gene That Causes Early Alzheimer's Is Found

A gene that causes the most aggressive form of Alzheimer's disease, one that can victimize people in their 30s, has been found by an international team of scientists. Although Alzheimer's usually appears after age 65, the newly found gene, when defective, causes the disease to strike at an early age. The researchers note that even though this form of the disease is rare, the gene's discovery may help to shed light on what happens to the brain to cause Alzheimer's in general, which could then lead to better treatment options.

The new gene is the third to be linked to the disease. Another gene causes Alzheimer's in rare cases at an early age, but not as early as the new gene. Yet another gene has been shown to increase the risk of developing Alzheimer's after the age of 60. ■

# HCFA Study Blames Sheer Numbers For Rising Medicare Costs

Medicare costs are rising astronomically due to the volume of those who will reach age 65 over the next quarter-century, and not because of longevity, according to a study by the Health Care Financing Administration. Trashing the belief held by many that longevity is the problem, HCFA noted that the next generation of Americans will live just a bit more than a year, on average, than the generation that reached age 65 in 1990. However, by the year 2020, almost twice as many Americans, 3.9 million, will be covered by Medicare, in contrast to 2.1 million covered in 1990.

HCFA estimates that the lifetime Medicare expenses for a person who turned 65 in 1990 are \$53,256. Adding the one year of longevity to a person who turns 65 in the year 2020 only raises the estimated lifetime Medicare expenses to \$54,326. But that slight increase, says HCFA, will mean a big increase in total Medicare spending because of the extremely higher number of people who will be covered. HCFA estimates that the lifetime Medicare costs for individuals who turn 65 in 2020 will be \$98 billion higher than for those who turned 65 in 1990. ■


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# Texas Society of the ACOFP Update

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

The Texas Society of the ACOFP Board would like to thank our members who attended the breakfast during the TOMA Convention at the Grand Kempinski Hotel in Dallas, Texas, on Friday, June 16, 1995.

The highlight of this breakfast meeting was the cutting of the cake celebrating the 42nd birthday of the Texas Society of the ACOFP. Dr. T. R. Sharp of Mesquite had this honor — he had the most seniority this year!

The main topic of discussion was the Texas Star program, which was started to fund the restoration of the new TOMA headquarters at the corner of 15th and Lavaca Streets. A contribution of \$1,000 or more to this fund designates the donor as a Texas Star. Texas Stars receive special benefits including: individual recognition in the *TEXAS D.O.* magazine; permanent recognition in the new TOMA building on a bronze plaque with all the Texas Stars names inscribed; a Texas Blue Topaz lapel pin or pendant to wear, identifying the wearer as a Texas Star; a special room in the TOMA building for Texas Stars to meet and conduct business; and honored status at a memorable note-burning gala.

All Texas Society of the ACOFP members at the breakfast were encouraged to become a Texas Star. Pledge cards were distributed that would allow pay-out of the donation over two years to soften the financial impact. I would like to stress that this is a once in a lifetime opportunity to become an integral part of a living monument to the osteopathic profession in Texas. The quest is over! TOMA has finally become a full-time health care player in Austin, Texas, and life will never be the same for us. The highly professional and political profile will carry with it more responsibilities. I know we are up to the task. Let's get on with it! Be part of that beacon which will illuminate our footprints for future generations of Texas D.O.s to follow. Invest in your profession and let our light shine for everyone to see!

Congratulations are in order for Dr. George Beasley of Fort Worth. He won a 19-inch portable color TV set given as a door prize at the breakfast meeting.

The PACERS had a meeting on Thursday afternoon, June 15. The topic of discussion was the Texas Star program and the proposal that the Texas Society of the ACOFP loan TOMA \$100,000 towards the restoration of the building at 15th and Lavaca Streets. The PACERS were unanimous in their support for the loan proposal.

After the Texas Society of the ACOFP breakfast on June 16, the Texas Society of the ACOFP Board met to discuss the loan of \$100,000 to TOMA in exchange for office space at the new TOMA headquarters in Austin. It was decided that a mutually agreeable deal, subject to legal scrutiny between the two parties, should proceed immediately. It was the intent of the Texas Society of the ACOFP Board that the final agreement would be a win-win deal for both organizations.

For those Texas Society of the ACOFP members who make

it to the Annual Business Meeting, scheduled during the 38th Annual Convention and 22nd Mid-Year Clinical Seminar at the Arlington Marriott in Arlington, Texas, on Saturday, August 5, at 12 noon, the complete arrangements between TOMA and the Texas Society of the ACOFP in regards to the \$100,000 loan will be thoroughly discussed.

Also, at the Annual Business Meeting, there will be several proposed By-Law changes. One of these changes would establish an ex-officio position on the Texas Society of the ACOFP Board entitled "Emeritus."

In a speech given by Steven Blumenkranz, Chairman of the Board of Insurance Equities Corporation, to the TOMA House of Delegates on June 14, the concept of a new insurance product called Asset and Income Protection Insurance (AIP), was discussed.

AIP is not a replacement for liability insurance but works by "piggy-backing" on, or working with, your liability insurance. It indemnifies the physician for assets or income exposed to seizure as a result of a judgment in excess of the underlying policy limits. The AIP limit is equal to the limit of liability of the underlying malpractice insurance. It is only available as indemnification, not as direct payment of judgment rendered against the physician. In essence, it pays the physician back for anything they take or can take from him or her; as opposed to paying them. AIP cannot be attached by the plaintiff or plaintiff's attorney; it is not available to the parties trying to injure a physician.

AIP coverage is economical and much less expensive than a doubling of your liability insurance limit. Because AIP indemnifies the physician, not the plaintiff, it does not encourage huge demands or catastrophic judgments. AIP coverage averages approximately 10 percent of the physician's liability insurance premium. Of course, Insurance Equities Corporation (IEC) will specify that the physician's medical malpractice liability insurance must be with a financially sound, approved carrier prior to the issuance of AIP coverage.

Additional information on AIP can be obtained from Oceanic Holdings, Inc., 4984 El Camino Real, Suite 100, Los Altos, CA 94022; phone 415-254-2300; fax 415-254-7971.

Dr. Michael McKinney, Commissioner of the Texas Health and Human Services Commission, was the speaker on Thursday morning, June 15, during the TOMA Convention. His topic was "Health Care in Texas." Dr. McKinney left the audience with several pearls to take home. Managed care is a managed cost, as some folks call it, is here to stay in Texas. As Texas Medicaid moves to managed care, Texas physicians who have been historical Medicaid providers will have a three-year grandfather clause whereby they cannot be excluded by insurers. In addition, Texas physicians cannot be excluded from seeing Medicaid patients because they are not board certified — no board certification clause for Medicaid. Finally, primary care physicians in Texas are very much in



hand, so don't panic and sign the first managed care contract placed in your hand. Get legal advice before signing a managed care contract. TOMA and the Texas Society of ACOFP recommend that its members have an attorney, who is experienced with managed care contracts, review the contract. Andre Hampton, J.D., phone number 512-480-3188, will review the contract for \$100. Better safe than sorry!

The old roller coaster effect occurred once again with the passage of a Patient Protection Act in Texas, and then the repeal of the measure by Governor George W. Bush. All Texas physicians were disappointed by Governor Bush's action. However, he asked his insurance commissioner to see if some of the provisions he vetoed could be implemented through regulations. The best way that I know of handling this situation is to trust but verify and validate by way of the ballot box. The ballot box is the place for citizens to cast the ultimate veto!

Some good news for Texas physicians occurred with the passage of Senate Bill 667 by Senator Frank Madla — it allows release of another physician's notes and reports. Prior passage of Senate Bill 667, if a physician sent copies of another doctor's notes or reports without valid authorization from that doctor, he or she could be liable for breach of confidentiality.

A Supreme Court ruling in June, 1995, may give Texans a break from lawyer solicitation of accident victims. Justice Sandra Day O'Connor's majority opinion said a Florida law that prohibits lawyer solicitations by mail for 30 days after an accident, protects the "privacy and tranquility of personal injury victims and their loved ones." Texas filed a friend-of-court brief supporting the Florida law and, hopefully, the U.S. Court of Appeals will reinstate the Texas law they blocked down in 1994.

In closing, I look forward to seeing everyone at the Texas Society of the ACOFP's Annual Convention at the Arlington Marriott in Arlington, Texas, August 3-6, 1995. ■

## CLIA Regulations Extended to Include Non-Physicians

Another final CLIA rule was published by the Health Care Financing Administration, broadening the scope of the "physician-performed microscopy" testing category. The regulations, which went into effect April 24, allow dentists, nurse practitioners, nurse midwives and physician assistants to perform microscopy testing.

Not included in the new "provider-performed microscopy" category are registered nurses, licensed practical nurses, medical assistants and emergency personnel.

The rules allow currently employed persons with equivalent training and experience, who under the previous rules needed more training, to qualify for positions.

The rule also expands the types of tests to include nasal smear exams for granulocytes, fecal leukocyte exams and qualitative semen analysis (limited to the presence or absence of sperm and detection of motility). The definition of "wet mount" exams has been clarified whereby they can be performed on any direct specimen that may be suspended in a drop of water or saline.

## David A. Vick, D.O., Earns Fellowship In AAO

The Board of Governors of the American Academy of Osteopathy (AAO) has announced the conference of Fellowship in the Academy upon David A. Vick, D.O., F.A.A.O. Dr. Vick is one of 86 osteopathic physicians nationwide who currently hold this status. He completed the examinations March 22, 1995, during the AAO's Annual Convocation in Nashville, Tennessee. President Eileen L. DiGiovanna, D.O., F.A.A.O., conferred the honor on him at the Academy's annual banquet.

Certified in osteopathic manipulative medicine, Dr. Vick currently is assistant professor in the Department of Osteopathic Manipulative Medicine at the University of North Texas Health Science Center at Fort Worth. He received his Bachelors Degree in Zoology at Northeast Missouri State University in 1963, earned his D.O. degree from the Kansas City College of Osteopathy and Surgery in 1963, completed a one-year rotating internship at Mount Clemens General Hospital, Michigan, in 1964, and completed an internal medicine residency at Flint Osteopathic Hospital, Michigan, from 1964-67.

Dr. Vick's professional affiliations include membership in the American Osteopathic Association, the AAO, the Cranial Academy, the Texas Osteopathic Medical Association and the American College of Physician Executives. Additionally, he has given many lectures and presentations on numerous osteopathic topics at various seminars across the country.

Established in 1990, the Committee on Fellowship in the AAO oversees the examination process and affords each candidate the opportunity to demonstrate his or her special achievement in the preservation and utilization of osteopathic principles and practice. This is accomplished through the successful completion of a thesis, as well as oral and practical examinations. Self-selected case studies from the individual's private practice form the basis of the examinations. ■

## FDA Okays Marketing of PEPCID® AC

Johnson & Johnson-Merck Consumer Pharmaceuticals Company has been given clearance by the Food and Drug Administration for the marketing of PEPCID® AC Acid Controller (famotidine 10 mg), the first and only non-prescription product that relieves and prevents heartburn and acid indigestion. The drug is the first of its class to become available OTC and the first OTC advancement for the treatment of heartburn since antacids were introduced over 100 years ago.

The maximum daily dosage (two 10 mg tablets) should not be taken for more than two weeks continuously except under advice of a physician. In addition, pregnant or nursing women should seek the advice of a physician before using the product. ■

# News from the University of North Texas

## Health Science Center at Fort Worth

### *Education Official Named to Veteran's Health Panel*



Benjamin L. Cohen, D.O., vice president for health affairs at the University of North Texas Health Science Center at Fort Worth, has been appointed to the Special Medical Advisory Group of the Department of Veterans Affairs. The 21-member panel of physicians from across the United States advises the VA on the care and treatment of disabled veterans. His appointment was announced by Kenneth W. Kizer, M. D., M.P.N., VA under secretary for health.

Dr. Cohen, who also serves as executive dean of the Texas College of Osteopathic Medicine at the health science center, is the second osteopathic physician to serve on the VA health panel. David M. Richards, D.O., president of the health science center, recently completed a six-year term on the advisory committee.

Dr. Cohen joined TCOM in 1991 as vice president for academic affairs and dean. He assumed his new duties when TCOM was redesignated as a health science center in 1993. A Fellow of the American College of Osteopathic Pediatricians, Dr. Cohen has been involved in graduate medical education for more than 20 years. He was the founding dean of the School of Osteopathic Medicine of the University of Medicine and Dentistry of New Jersey, where he served from 1977-1985. Prior to joining TCOM, Dr. Cohen was chief executive officer of two international consulting firms concerned with the design, development and management of health care facilities — 21st Century Health Corporation and Ameriwell International.

Dr. Cohen served as president of the American Association of Colleges of Osteopathic Medicine from 1982 to 1984 and was named chairman of its Board of Governors in 1982. A native of Brooklyn, New York, Dr. Cohen

received his undergraduate education at Purdue University and earned his D.O. degree from the University of Health Sciences — Kansas City, Missouri, in 1960.

Dr. Cohen is a board member of the North Texas Medical Education Consortium, serves on the Health Care Reform Committee of the State of Texas Coordinating Board for Health Education and is a consultant to the Texas Medical Association's Council of Medical Education. He is a member of the American Osteopathic Association and the Texas Osteopathic Medical Association.

### **Silver Anniversary Celebration Honors Founding Faculty**

Three founding faculty members of TCOM and a former Fort Worth mayor will be honored this year as part of the UNTHSC-FW's Silver Anniversary celebration, marking 25 years as a medical institution.

Mary Schunder, Ph.D., Elizabeth Harris, Ph.D., and John Gaugl, Ph.D., are this year's recipients of the Founders' Medal, the health science center's highest honor. Bob Bolen will receive the Mary E. Luibel Distinguished Service Award, recognizing long-standing community service and dedication to the advancement of osteopathic medicine.

They will be honored during a formal academic convocation ceremony September 15 at Will Rogers Memorial Auditorium, and will receive their awards during the Silver Anniversary Awards Banquet that evening at the Worthington Hotel.

Drs. Schunder and Harris joined the faculty of TCOM in 1970, its first year of classes. Dr. Schunder was the founding chair of anatomy and cell biology and Dr. Harris was the founding chair of microbiology and immunology. Dr. Gaugl joined the faculty the following year to found and chair the department of physiology, as the first class advanced to its second year of studies.

Bolen is an entrepreneur and public servant whose support of the Fort Worth community has directly impacted the health science center throughout the years. In particular, he was active behind the scene in helping TCOM reach a agreement with the U. S. Air Force to provide care for patients at Carswell Air Force Base. He was also an advocate of TCOM to leaders of the Texas Legislature as the institution sought funding for a new library, which opened in 1987.

The health science center's Silver Anniversary celebration will continue throughout the year with events for students, employees, alumni and the community. Coordinating the year's events is Elizabeth Denton, executive director of the TCOM Alumni Association. A Silver Anniversary Commission has also been formed to lend support for all the events and to organize a major fundraising gala in June, 1996. The commission, comprised of leaders in the community and the osteopathic profession, is chaired by Merilyn Richards, president of the Auxiliary to the Texas Osteopathic Medical Association and the wife of President David M. Richards, D.O.

The health science center cornerstone medical school, Texas College of Osteopathic Medicine, was opened in 1970 as a private institution by three Fort Worth osteopathic physicians Drs. Carl Everett, George Luibel and D.D. Beyer.

The first class met in temporary classrooms in the osteopathic hospital, now the Osteopathic Medical Center at Texas, and used donated books. In 2 years, the institution has grown to a 1.2 acre, \$71 million complex. A Graduate School of Biomedical Sciences opened in 1994. In August, construction began on a new \$10 million campus improvement plan that will add a clinical education building and expand the center's primary research facility.



## Graduate School Begins Distance Learning

Distance learning science took on "far-reaching" implications June 5 when the first distance learning equipment was used in the health science center and at the University of North Texas in Denton.

UNT Professor Tom Beiting, Ph.D., is teaching the first course, biostatistics. Rather than commute, the students listen to Dr. Beiting's lectures and interact with him on a two-way audiovisual system from classrooms at both schools. Beiting is the only one who travels — lectures one day a week at UNT and another day at the health science center.

Both schools plan to expand the distance learning curriculum for more collaborative teaching between UNT health science professors and health science center faculty. Currently, many health science center faculty travel to Denton to teach undergraduate courses.

## Regents Approve Faculty Promotions

Ten faculty members received academic promotions at the June 9 meeting of the health science center's Board of Regents in Denton. Four of the promotions also were granted tenure. The changes will be effective September 1.

Promoted from associate professor to professor were James L. Caffrey, Ph.D., and Patricia A. Gwartz, Ph.D., both of Physiology; Patrick Cammarata, Ph.D., of anatomy and cell biology; and Stephen E. Weis, D.O., of internal medicine.

Faculty members promoted from assistant professor to associate professor were Rafael Alvarez-Gonzalez, Ph.D., and Wayne Nicholson, Ph.D., of microbiology and immunology; Richard A. Easom, Ph.D., of biochemistry and molecular biology; Raymond M. Pertusi, D.O., of internal medicine; and Carolyn W. Quist, D.O., of OB/GYN.

Drs. Alvarez-Gonzalez, Easom, Nicholson and Pertusi also were approved for tenure.

Richard A. Schellin, D.O., of radiology, was promoted from clinical assistant professor to clinical associate professor.

## Scientist Receives ACSM Award

Physiologist Peter Raven, Ph.D., FACSM, received the prestigious Citation Award from the American College of Sports Medicine at its annual meeting in May. The award is the ACSM's second-highest award for contributions to sports medicine and exercise science. ACSM described Dr. Raven as "a world class scientist of the first order."

Dr. Raven is professor and chair of the Department of Physiology at the health science center. He also is a member of the graduate school faculty and adjunct professor in the departments of biological sciences and kinesiology, health promotion and recreation at the University of North Texas. He also serves as a research consultant to Presbyterian Hospital and the University of Texas Southwestern Medical Center at Dallas.

Dr. Raven has been editor-in-chief of *Medicine and Science in Sports and Exercise* since 1989. He has served as vice president and president of ACSM, and founded the Texas Chapter of ACSM. The Texas Regional Chapter recognized his many contributions by establishing the annual Peter B. Raven Lecture.

## Dr. Rubin Named AOA Lecturer

Bernard Rubin, D.O., has been selected by the American Osteopathic Association Bureau of Research to be the 1995 Louisa Burns Memorial Lecturer at the AOA National Convention, October 15-19, in Orlando, Florida.

Dr. Rubin is professor of medicine and chief of rheumatology at the health science center. In addition to his classroom and clinical responsibilities, Dr. Rubin is an active clinical researcher. He founded and directs the research-oriented Center for Osteoporosis Prevention and Treatment at the health science center. His other research interests include rheumatology, arthritis, muscular skeletal diseases, fibromyalgia, lupus, back pain and carpal tunnel syndrome.

A graduate of the Chicago College of Osteopathic Medicine, Dr. Rubin joined the health science center faculty in 1983.

## Faculty Researcher Tops AHA's Grant List

Glenn Dillon, Ph.D., of the health science center's Department of Pharmacology, has been named a recipient of the 1995 Lyndon Baines Johnson Research Award by the American Heart Association's Texas affiliate. His research application, which brought him a two-year grant of \$41,800 each year, was given the highest meritorious ranking by one of the three research panels, making him one of only three recipients in the state.

Dr. Dillon is the first faculty member ever to have received AHA's top research award. He was presented with the award during the AHA's annual meeting in July.

Also receiving a grant from the AHA was Patricia Gwartz, Ph.D., of the Department of Physiology. Her two-year grant was also for \$41,800 each year. ■



# Wayne R. English, Jr., D.O., Recipient of Prestigious Sports Medicine Award



Wayne R. English, Jr., D.O., (left) accepts award from AOASM President Craig Phelps, D.O.

Wayne R. English, Jr., D.O., of Bedford, has received the American Osteopathic Academy of Sports Medicine (AOASM) Award of Meritorious Service. The award was presented on May 4, 1995, by Craig Phelps, D.O., AOASM President.

In presenting the award to Dr. English, Dr. Phelps noted that the award is given on rare occasions to those individuals who have demonstrated the highest level of commitment to the AOASM and to the sports medicine profession. The award was last given in 1987.

The award was presented to Dr. English for his unrelenting efforts to gain recognition for the practice of sports medicine as a board certified specialty. His award reads as follows:

*Wayne R. English, Jr., D.O.*

*Sports Medicine Physician, Master Teacher, Humanitarian. Because of his courage and perseverance, the long pursued dream of certification in sports medicine is a reality.*

Dr. English is Medical Director of the Sportsmed Text Back Institute, located in Bedford, Texas. He and his wife Ann, reside in Burleson.

## Fort Worth Physician Wins National Contest In "Ladies' Home Journal"

Mary Ann Block, D.O., won the 1995 *Ladies' Home Journal* "My Mom's One Smart Lady" contest, thanks to her daughter, Michelle, who wrote the winning entry: "My mom's one smart lady because I had medical problems doctors couldn't help, so my mom began medical school at age 39 so she could cure me. And she did!"

The feature story on Dr. Block and her daughter appeared in the May issue of the *Ladies' Home Journal*. As the winner of the 1995 "One Smart Lady Award," Dr. Block is in good company, as last year's winner was Oprah Winfrey.

Michelle became ill at the age of eight from prescribed medications. When doctors could not get her well, Dr. Block found an osteopathic physician who not only helped her get her daughter well but inspired Dr. Block to become an osteopathic physician. Michelle, who grew up in Fort Worth, is today a healthy, happy and successful third-grade teacher at The Hockaday School in Dallas. Dr. Block says she went to medical school in self-defense, to ensure that her family would not get hurt by medicine again.

Interestingly, Dr. Block also won third place in the same contest by describing her mother's attitude as she successfully battled inoperative lung cancer. When M.D. Anderson could not help, Dr. Block, along with Osteopathic Medical Center of Texas medical staff oncologists William Jordan, D.O., and

Greg Friess, D.O., brought her mother where she is today four years later, in complete and total remission.

Having been in the position of patient and parent with health concerns, Dr. Block understands her patients' concern and works closely with them to look for the underlying cause of problems, rather than just treating symptoms with drugs.

Dr. Block is well known for her non-pharmacologic approach to treating children who have been diagnosed as "labeled" with Attention Deficit Hyperactivity Disorder (ADHD). These children are commonly treated with medications, one of which Dr. Block's daughter, Michelle, was taking when she became ill.

"When effective, these medications only temporarily treat some of the symptoms of the disorder, have many side-effects and leave the underlying problem undiagnosed and untreated," Dr. Block explains during her many speaking engagements on the subject. "This is why I don't treat children diagnosed with ADHD with drugs but instead look for the underlying cause of the problem."

Dr. Block, a staff physician at Osteopathic Medical Center of Texas, is Medical Director of the Block Center in Bedford, Texas, where she now offers to other families the kind of health care she wanted for her daughter.

# AAO Announces Availability of 1994 Yearbook

The American Academy of Osteopathy has announced the availability of its 1994 Yearbook *Louisa Burns Memorial*, compiled and edited by Myron C. Beal, D.O., F.A.A.O.

The publication contains three sections: 1) Louisa Burns Memorial Lectures, which were established by the American Osteopathic Association to honor this pioneer osteopathic teacher; 2) the working hypothesis for the research conducted by Dr. Burns and the A.T. Still Research Institute; papers concerning methods of producing lesions and evidence of correction; a discussion of viscerosomatic and nato visceral spinal reflexes and later papers on the pathology of vertebral sprain, secondary lesions and the mediate effect of bony lesions; and 3) information from the AAO's Louisa Burns Osteopathic Research Committee on the subject of research design, standards and protocol. This Yearbook is included for D.O.s who aspire to conduct osteopathic clinical research.

All AAO members receive a complimentary copy. Non-AAO members can purchase a copy of the *Louisa Burns Yearbook* for \$40 plus \$5 shipping/handling.

The AAO continues to pursue the documentation of research findings which illustrate that there is a significant research base for the osteopathic approach to health and disease. ■

# CDC Recommends That U.S. Adults Update Immunizations

In the wake of a diphtheria epidemic in the former Soviet Union, the Centers for Disease Control and Prevention are recommending that U.S. adults update their immunizations as soon as possible, stating that as many as 60 percent of adults may have "less than protective" levels of immunity to the disease. The agency has not, however, issued alerts to state health authorities.

Nearly 50,000 cases of diphtheria were reported in the former Soviet Union in 1994, with 1,742 confirmed deaths. Although no current cases have been reported in the U.S., the CDC is monitoring the epidemic and is concerned about the ease of transmission through travel.

The CDC recommends the following schedule for diphtheria and tetanus immunizations:

- \* Children should be immunized for diphtheria, tetanus and pertussis at two, four and six months; at 12 to 18 months; and again at four to six years.

- \* A diphtheria/tetanus combination should be given again at 11 to 16 years.

- \* After age 16, adults should receive a diphtheria/tetanus booster every 10 years. ■

# Patent Protection for Brand-Name Drugs Extended

In a ruling that the Food and Drug Administration says it was forced to make, patent protection for certain brand-name drugs has been extended from 17 to 20 years from the date the manufacturers filed for a patent. The FDA noted that the decision came out of a new global trade agreement, known as the General Agreement on Tariffs and Trade (GATT), and the way that Congress chose to implement it. "Our legal analysis was that the generic companies have to wait until the extended patent expires before they may market their products," stated Deputy FDA Commissioner William B. Schultz.

Senator David Pryor (D-Ark.), an opponent of the FDA ruling, warned that it would cost consumers billions of dollars in higher prices for years. "GATT's whole intention was to help consumers. This goes just the other way," he said. He intends to prepare legislation to override the ruling.

## Texas Osteopathic Medical Association *Political Action Committee*

Established to protect and promote the interests of osteopathic medicine in Texas.

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# Public Health Notes

## *Controlling STD in the Last Years of the 20th Century: a New Model*

Nick U. Curry, M.D., M.P.H.

The treatment of sexually transmitted diseases has a special place in my career in public health. I was first introduced to public health in the old central STD clinic in Houston 20 years ago. I can remember it well to this day. I walked into that large, forbidding structure early one Monday morning, not knowing exactly where to go. I was more than a little nervous. I finally located the registration window and walked up to it to ask directions from the clerk. "Take a number and sit over there," she ordered. I attempted to tell her that I had been told to ask for a particular person. She frowned and said, "I told you to take a number and sit over there. Now if you don't, you are going to lose your place in line." By this time I was completely unnerved. However, I summoned my courage and once again tried to explain that I was a medical student and beginning my first day on an elective rotation. Fortunately for me, a nurse happened by and took me to my assigned location. Otherwise, I might have been sitting in that huge, hot room with about 100 other unfortunate people, waiting in a less than clean environment on broken metal chairs to see a retired army corpsman for my shots in the butt. Everyone, in those days, seemed to get shots in the butt. I believe it may have been some form of punishment.

Now I know that nobody has ever worked in a clinic like the one I just briefly described, but I hope I have given you a vivid image of what I experienced. Is this a place you would want to visit or send a friend to visit? I think not. Yet, is that STD Clinic of 1975 very different from our clinics of today? In many instances and ways, the answer is yes. In some fundamental ways, the answer may be no. We have improved our physical facilities in most areas of the state and have improved our clinical and Disease Intervention Specialist (DIS) technical proficiency also. However, we may not have adequately improved our customer service and the people who come to us are indeed our customers. Now it is

doubtful that today we could find a clerk like the one I encountered, but we in public health have a way to go in developing good customer interactions. I want to make it clear that I am not singling out the clerks and receptionists. All of us can do better. Clerks and receptionists do, however, play an important role in making customers feel comfortable. They are the first ones to greet the customer and are often the last person to see the customer before he or she leaves our office. It is, however, important that we all treat the customer with respect.

One of my major difficulties with how we operate is our tendency to speak familiarly with the customer, particularly when they are adults. I believe that we should not be on a first name basis with a customer unless they give us that permission. We should address people as Mr. or Ms. It is a courtesy that seems to be losing ground in our society, even in the private sector. I really dislike visiting a doctor or dentist's office and being greeted by "Hello, Nick. The doctor will be with you shortly," from some staff member whom I do not know or perhaps have never seen before. We can do better than that.

We are now in an environment of significant change. Patient populations that we once claimed as the sole domain of public health are turning to the private sector to receive their STD care. In turn, as Medicaid reimbursements increase somewhat, private practitioners are welcoming patients in whom they had little interest in the past. Additionally, as more individuals become members of managed care/managed cost plans with nominal copayments, they will find our fee-for-service plan less appealing. This trend will only be accelerated by the advent of managed care plans taking on the care of Medicaid patients. The statistics are most telling. In our community of Tarrant County, the numbers of cases of STDs have shown no significant decline during the past few years and for some conditions have

actually increased. Nevertheless, patient visits to our clinics have been declining over the past two years. On the other hand, we recently reported for the first time in modern history, more cases treated STD from the private sector than from the health department. Time will tell us if these trends will be sustained. I tend to think that they will be sustained.

Yet, the health departments are charged with the control of STDs in our various communities. We will have to develop new and innovative ways of meeting that responsibility. One of the approaches should be professional education for private practice physicians as they see more STDs in their office. Most private physicians do a good job of diagnosing, documenting, reporting and treating STDs. However, there is a troubling minority who consistently fail to obtain laboratory confirmation of clinical diagnoses and treat conditions inappropriately. These are the physicians who appear to believe that cephalexin is a cure-all for every bacterial infection in the world or, are the habit of prescribing whatever the pharmaceutical representatives are promoting at the moment. It is important that this group be properly educated. I will say parenthetically that this is also at times true of the diagnosis and treatment of tuberculosis and HIV disease. We must also offer consulting services for we, after all, remain the experts in the area of STD management. We must continue to offer laboratory testing for both common and unusual STDs. Perhaps most important, we must continue to offer strong disease intervention services through our excellent DIS staff. Private doctors or HMOs will not be doing contact (sexual partner) elicitation, contact tracing, bringing partners to treatment, epidemiologic investigations. The interest is not primarily in interrupting the transmission of infectious diseases but rather in treating their individual patients or insured populations. This is the core public health activity and we must



use it vigorously. It is and will continue to be the backbone on which we hang our disease transmission interruption and epidemic prevention efforts.

And yes, there will continue to be public health clinics specializing in the treatment of STDs in most communities in our state. There will continue to be demand for our expert skills. There will continue to be those difficult cases that other practitioners refer to us. There will continue to be those patients who choose to come to the practitioners with a long history of success in treating their problems and understanding their life situations and lifestyles. The numbers will be smaller but they will come.

In the best of all possible worlds, I would be telling you that we have perfected vaccines for herpes, syphilis, gonococcal disease and HIV. I would be telling you that we had conquered the major STDs and 75 percent of us could now move on to address other pressing public health issues like drug abuse, family and random violence and teen pregnancy. Unfortunately, I cannot do that. Perhaps in the year 2000 or the year 2005, I will be able to do so, for research is moving ahead in the development of such vaccines.

It is important that such research be given high priority and ultimately succeed. We recognize today that the public health intervention model developed some 50 years ago has been only partially successful. In the years after World War II, a concerted effort was made to eliminate STDs from the United States. New antibiotics were being developed and, in combination with educational efforts and disease transmission interruption techniques, were applied with the grand hope of eliminating the major STDs. We had significant successes throughout the 1950s, 60s and 70s, with rates of gonococcal disease and syphilis steadily falling.

In the 1980s, however, the trends leveled off and in the 1990s, we have seen the rates begin to increase. This is occurring, even in the face of AIDS and massive public education campaigns. Conventional therapeutics and intervention models had come face to face with basic human nature. The old model had achieved its best results. It could not make further gains. It could perhaps hold the line but would be

unable to achieve further significant reductions in the rates of STDs.

The fact is, people are going to have sexual intercourse. Having spent 15 years in the practice of public health, I see no evidence that would cause me to think otherwise. It is one of the things that they do. It is biological. It is natural. A certain percentage will continue to have intercourse with multiple partners. They will most often be young. They have been called our future. They will not change their behaviors for all the educational tapes and presentations that we provide for them or preachments and condemnations that they will receive. For them, biology rules. In the face of such a sub population, and it is by no means a small group, our current model

can never achieve the hoped for elimination of the major STDs. We must develop new models and strategies. The development of vaccines for the major STDs is one such strategy but there must be others. Vaccine research continues to move forward with fits and starts. There are significant difficulties being encountered in the development of HIV, herpes simplex and gonococcal vaccines. We continue to hope for major breakthroughs. They will come. In the meanwhile we must develop other new strategies.

*(The preceding article was a presentation made to the joint Fort Worth-Tarrant County and Dallas County Sexually Transmitted Disease staffs at their annual retreat in May, 1995.)*

## Letter

Dear Friends and Colleagues:

On behalf of the student chapter of the Christian Medical and Dental Society at the University of North Texas Health Science Center at Fort Worth, I want to thank you for your contribution to the CMDS mission trip to Reynosa, Mexico. Without the support and generosity of contributors such as yourself, this mission trip effort would not be possible.

This year's mission team consisted of 31 student doctors, five physicians, one physician's assistant, nurses, translators and spouses. Four different teams dispersed daily to various mission sites throughout the city and set up clinics, usually in churches or homes. Each day was definitely a new adventure with the planning of schedules, assignments, directions and packing. Through the genuine effort of all the team members, CMDS served over 1,200 people in the Reynosa community. Despite this, there are still great medical and spiritual needs for the people of Reynosa.

As a student-sponsored organization here at UNTHSC, CMDS is committed to living out our faith by serving our fellow man. Your contributions and support helped change the attitudes and lives of not only many in Reynosa, but also the members of this year's mission effort. Again, I graciously thank you for your support as we look forward to next year's mission trip. Thank you and God bless you.

Sincerely,

Matthew Glick  
CMDS President

# Blood Bank Briefs for Physicians

## "HLA-Matched Platelets for Patients Refractory to Random-Donor Platelets"

Janice F. Blazina, M.D., Medical Director  
Carter Blood Center, Fort Worth, Texas

The guidelines of the NIH consensus conference on platelet transfusion have gained acceptance. Transfusion of random platelet concentrates (those obtained from whole blood donation, each with a volume of 50 ml) is indicated when: 1) platelet count is below 50,000 and patient is scheduled for an invasive procedure; 2) platelet count is below 20,000 and platelets are being given prophylactically; and, 3) a platelet functional defect (thrombocytopathy) is present.

If the patient receives a platelet transfusion, a platelet count should be ordered prior to the infusion and one hour post-transfusion. Alternatively, a ten-minute post-transfusion platelet count can be done. Using the formula below, corrected count increment (CCI) can be determined. (BSA = body surface area in square meters.)

$$CCI = \frac{(\text{post plt count} - \text{pre plt count}) \times BSA}{\text{number of plts transfused as } 10E11}$$

When the patient receiving random platelets fails to achieve a corrected count increment of  $>7500/\text{ul}$ , reasons for the failure to respond should be sought. The list of conditions resulting in a lack of a platelet increment includes fever, sepsis, bleeding, hypersplenism, disseminated intravascular coagulopathy, and alloimmunization, either to HLA (histocompatibility locus antigens) or platelet-specific antigens. After two occasions of failure to respond, the patient should be considered refractory.

Patient serum should then be submitted for an HLA antibody screen, and an HLA type from patient lymphocytes should be determined if not already known. If the HLA antibody screen is negative, then transfusion of HLA-matched plateletpheresis products will probably be no more beneficial than random platelets and is not indicated. If the HLA

antibody screen is positive, then transfusion of HLA-matched plateletpheresis products should be considered.

Plateletpheresis products, also known as single-donor platelets, are obtained by apheresis of a donor in a procedure which takes one to two hours. They are usually equivalent to six or more units of random-donor platelet concentrates. The risk of transfusion-transmitted disease is less because the recipient is exposed to only one donor per dose of platelets rather than the number constituting the pooled platelets. Because the HLA type of plateletpheresis donors has already been determined, the blood center can compare the HLA type of the recipient with donor types and select a match which lacks the antigens corresponding to the recipient's antibody. Due to the wonderful complexity of the HLA system and the existence of cross-reactive groups, an exact match of all four HLA-A&B antigens is usually

not required to obtain a satisfactory increment in the platelet count.

Pre and post-transfusion platelet counts should be obtained as random platelets when plateletpheresis products are given. If a given patient appears to respond best to certain apheresis platelets, that donor can donate as often as every 48 hours but not more than twice in one week and 24 times in a 12-month period for that patient.

Before filters to leukoreduce red cells and platelets were used, up to 70 percent of multiple transfused oncology patients became refractory to random platelets. Carter Blood Center is now expanding the number of plateletpheresis donors to increase availability of both random plateletpheresis products and HLA-matched plateletpheresis products to better serve such patients. Questions about ordering these products can be directed to the blood center.

## Insurance Chief Wants Elements Of Patient Protection Act Implemented

Texas Insurance Commissioner Elton Bomer is looking into ways to implement various provisions contained in the Patient Protection Act bill, which was vetoed by Texas Governor George W. Bush, who noted that although the Act "addressed a number of legitimate concerns," it was overly intrusive and might raise costs.

Specifically, Commissioner Bomer has instructed his department to establish rules that would require HMOs to provide "readable and understandable" policies; prohibit any type of retaliation on the part of HMOs against enrollees who appeal decisions; and require insurers to provide due process when a health care provider's contract is terminated or refused.

In addition, he is asking the Insurance Department to prepare an annual report on HMOs and PPOs, to include quality of care, service area, financial condition and complaint history.

# Primary Care Choice Continues To Rise Among Osteopathic Medical Students

Responding to the nation's need for more primary care physicians, 44 percent of the class of 1994 in the nation's schools of osteopathic medicine reported that they plan to choose careers in primary care. This is the highest percentage choosing primary care since 1988 and continues a long-term, turnaround trend away from high-cost, high-tech medicine.

## Reference For "People Skills"

A desire to practice strong "people skills" seems to be the major influence in osteopathic medical students choosing primary care careers, according to the 13th annual survey of seniors and freshmen, *Debts and Career Plans of Osteopathic Medical Students in 1994*, recently released by the American Association of Colleges of Osteopathic Medicine (AACOM).

"We are encouraged by these numbers and are truly proud of our students," remarked Olen E. Jones, Jr., M.D., Chairman of AACOM's Board of Governors and President of the West Virginia School of Osteopathic Medicine. "We are happy to see osteopathic medical students moving into a wide variety of residency specialties," he said, "but we're especially pleased when a large number of graduating seniors choose primary care for their osteopathic medical careers. It is our strong belief that a career path in primary care is the preferred path for the future."

## Personal Debt Still Climbing

Education debt, however, remains a major burden for students of osteopathic medicine, as it is for graduates of most health professions programs. Fully 94 percent of all 1994 graduates carried some degree of debt with them; the average debt load was \$93,100.

Seniors expected it would take them an average of 11.7 years to erase their education debts. Freshmen, slightly

more optimistic, thought it would take only 9.9 years to repay their anticipated average total of \$92,800.

Female freshmen anticipated piling up more debt than male freshmen. However, after four years of osteopathic medical school, female seniors consistently graduate with debt levels below that of their male colleagues.

## How Much Will They Earn?

Freshman osteopathic medical students in 1993-94 said they expected to earn an average of \$68,300 for their first year in practice (some four to seven years hence). This was slightly less than the prediction by the previous year's freshmen of an annual average of \$69,400. The 1993-94 freshmen also said they expected an average annual income of \$155,600 after 10 years in practice, down from the \$158,000 expected by the 1992-93 freshman class.

The graduating class of 1994, however, had much higher salary expectations than freshmen and the previous graduating class of 1993. The 1994 seniors predicted the average income for their first year in practice would be \$84,100; in their 10th year they expected it to be \$186,300.

## Survey Drawn From 15 Schools

The 1993-94 survey was conducted among students of 15 of AACOM's 16 member schools of osteopathic medicine. The results are based on a 73.4 percent response from the 1,792 graduating members of the class of 1994 and a 57.6 percent response from the 2,162 incoming members of the 1993-94 freshman class.

In September, 1993, Lake Erie College of Osteopathic Medicine (LECOM) in Erie, Pennsylvania, became AACOM's 16th member school. LECOM students did not, however, take part in this year's survey

because they did not enroll their first class until 1993 — too late to be included in this report. They will be included in AACOM's 14th annual survey of osteopathic medical students.

Inquiries regarding *Debts and Career Plans of Osteopathic Medical Students in 1994* may be directed to the survey's author, Allen M. Singer, Ph.D. at AACOM, 6110 Executive Boulevard, Suite 405, Rockville, MD 20852. Single copies of the report may be purchased from AACOM at the above address for \$13.00.

AACOM is dedicated to the advancement and enrichment of osteopathic medical education in the nation's osteopathic medical colleges. ■

## National Survey Ranks HMOs

Harris Methodist Health Plan and Scott & White Health Plan ranked as Texas' top HMOs in a recent national survey. Nearly 100,000 federal government and U.S. Postal Services employees or retirees in 250 HMOs were polled, with consideration given to quality of care, access to services and other criteria.

The independent review was performed by the Center for the Study of Services, and funded by the U.S. Office of Consumer Affairs, Consumers Union, and participating HMOs. Although the survey was confined to federal and postal workers, the Center plans to conduct a broader survey of HMO members in the near future.

In the meantime, the *Consumers' Guide to Health Plans*, based on this survey, can be purchased for \$12 from Health Plan Guide, 733 15th St. NW, Suite 820, Washington, D.C. 20005. Also, two-page reports on individual plans are available in minimum quantities of 1,000.



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**PRIMARY CARE PEDIATRICIAN** — The Department of Pediatrics of the Texas College of Osteopathic Medicine, University of North Texas Health Science Center at Fort Worth is recruiting a board certified pediatrician for its growing primary health care program and for student and resident teaching. Interested applicants should respond to: Alan Levine, D.O., Associate Professor of Pediatrics, UNT Health Science Center at Fort Worth, 3440 Camp Bowie Boulevard, Fort Worth, TX 76107-2699. *An Equal Opportunity/Affirmative Action Institution.* (08)

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<sup>1</sup>1985 Commissioners' Individual Disability Table A. Seven-day Continuance Table.

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