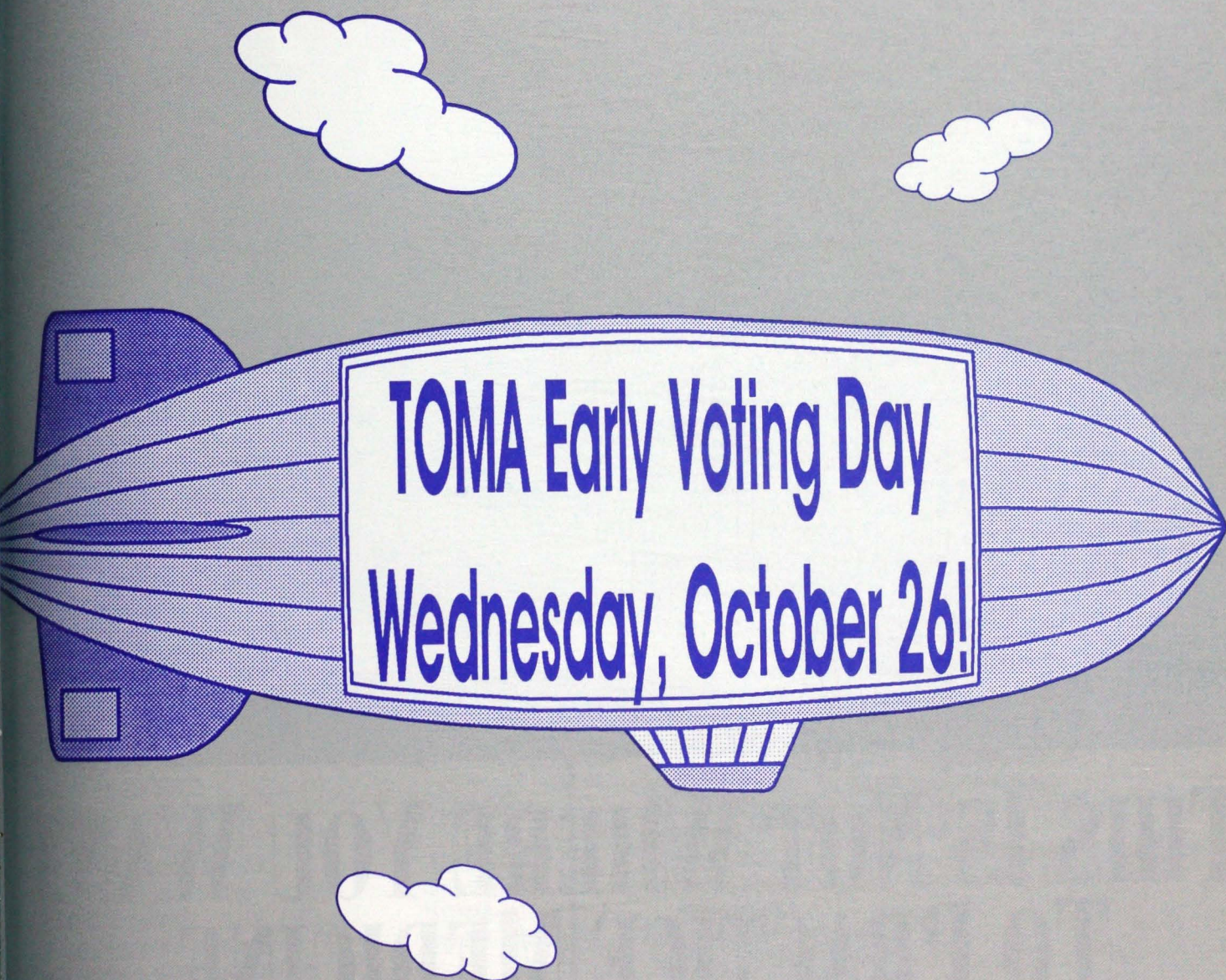


# TEXAS DO

XXXI, No.9

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

October, 1994



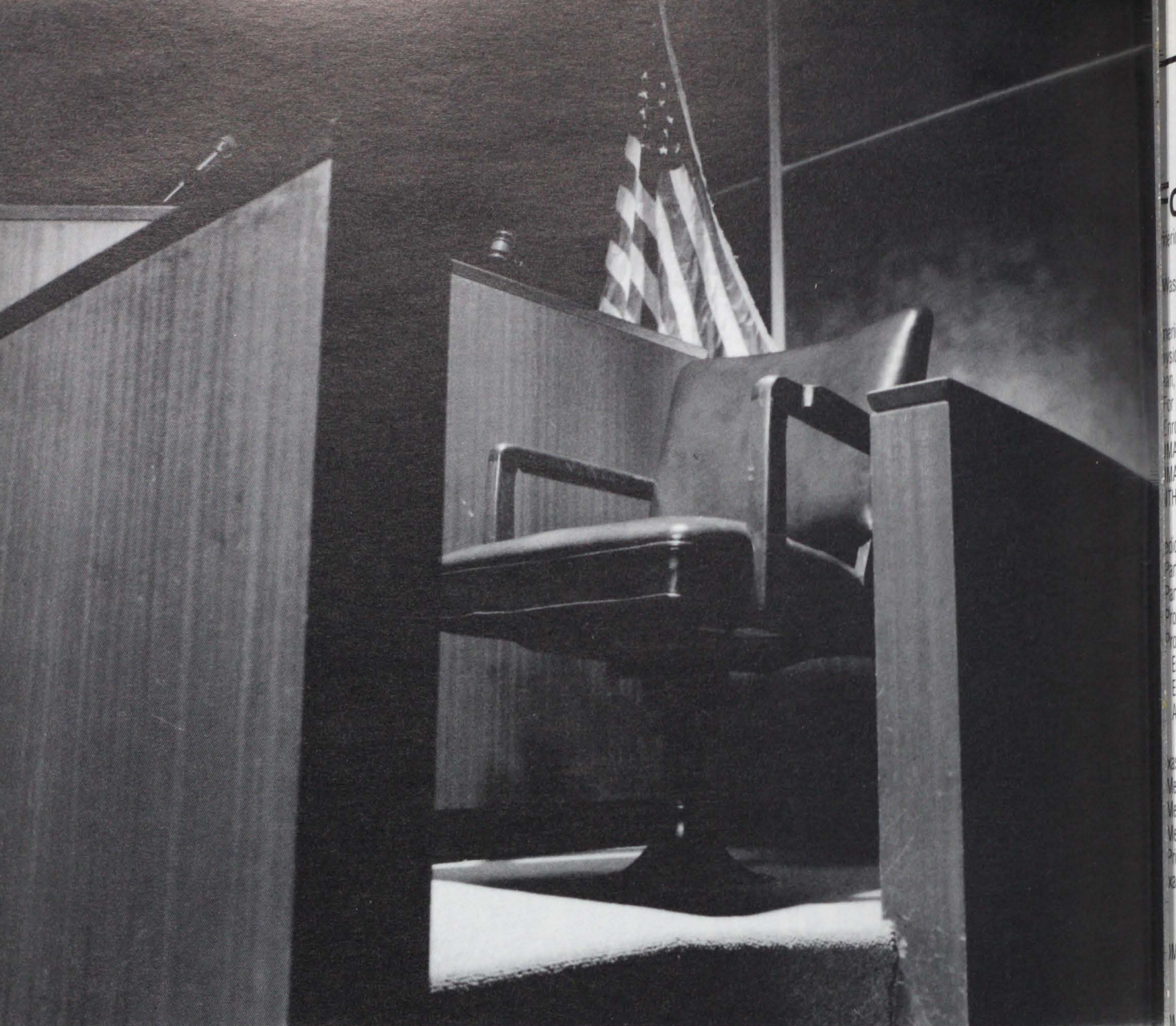
☺ ***TOMA Membership Committee Announces  
New Member Initiative***

• • • • •

► ***Robert G. Maul, D.O. - Lubbock***

*"Thoughts from the ACOFP President-Elect"*





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	Dallas Metro 429-9120
Medicare Office:	
Part A Telephone Unit	214/470-0222
Part B Telephone Unit	903/463-4495
Profile Questions	214/669-7408
Provider Numbers:	
Established new physician (solo)	214/669-6162
Established new physician (group)	214/669-6163
All changes to existing provider number records	214/669-6158
Texas Medical Foundation	512/329-6610
Medicare/CHAMPUS General Inquiry	800/725-9216
Medicare/CHAMPUS Beneficiary Inquiry	800/725-8315
Medicare Preprocedure Certification	800/725-8293
Private Review Preprocedure Certification	800/725-7388
Texas Osteopathic Medical Association	512/388-9400
	in Texas 800/444-TOMA
	FAX No. 512/388-5957
TOMA Physicians Assistance Program	817/294-2788
	in Texas 800/896-0680
	FAX No. 817/294-2788
	in Texas 800/444-TOMA
TOMA Med-Search	
TEXAS STATE AGENCIES:	
Department of Human Services	512/450-3011
Department of Public Safety:	
Controlled Substances Division	512/465-2188
Triplicate Prescription Section	512/465-2189
State Board of Health	512/458-7111
State Board of Medical Examiners	512/834-7728
Texas State Board of Medical Examiners (for disciplinary actions only)	800/248-4062
State Board of Pharmacy	512/832-0661
State of Texas Poison Center for Doctors & Hospitals Only	713/765-1420
	800/392-8548
	Houston Metro 654-1701
Texas Workers' Compensation Commission	512/448-7900
FEDERAL AGENCIES:	
Drug Enforcement Administration:	
For state narcotics number	512/465-2000 ext. 3074
For DEA number (form 224)	214/767-7250
CANCER INFORMATION:	
Cancer Information Service	713/792-3245
	in Texas 800/392-2040

# TEXAS DO

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

## FEATURES

	Page
President's Corner	5
TOMA Board of Trustees Spotlight:	
Jim W. Czewski, D.O.	8
3rd Annual Texas Health Professional's Peer Assistance Conference - Program and Registration Information	9
New Texas Interns and Residents Introduced	10
Robert G. Maul, D.O., ACOFP President-Elect, Discusses Plans for ACOFP's Future	16
Convocation 1994 Welcomes New Students; Founders' Medal and Mary E. Luibel Award Presented	17
Recruit a New TOMA Member and Save on Annual Convention Registration; See details	18
In Memoriam	20
Lawrence B. Greif, D.O.	
Osteopathic Medicine "Early Voting Day" in Texas is October 26	25
New TOMA Members Introduced	28

## DEPARTMENTS

Calendar of Events	4
What's Happening in Washington, D.C.	18
ATOMA News	22
Letters to the Editor	22
District News	23
Texas ACOFP Update	24
Self's Tips & Tidings	27
Public Health Notes	30
News From the University of North Texas Health Science Center at Fort Worth	32
Practice Locations in Texas	34

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October, 1994

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## Calendar of Events

### OCTOBER 9-15

National Osteopathic Medicine Week  
"Osteopathic Medicine: A Vital Piece of the  
Healthcare Puzzle"  
Contact: American Osteopathic Association  
1-800-621-1773

### OCTOBER 26

Osteopathic Medicine "Early Voting Day" in  
Texas

### OCTOBER 29 - NOVEMBER 5

Osteopathic Advantage  
"The Motor Vehicle Accident Patient"  
Seminar/Cruise  
Hours: 16 1-A CME hours applied for  
Contact: Shannon  
512/264-0082

### NOVEMBER 13-17

AOA Convention  
Location: San Francisco Moscone Center  
San Francisco, California  
Contact: 1-800-621-1773

### 17-20

Post AOA Convention Seminar – Tri-State  
Trip  
"Shared Medical Practice Situations"  
Sponsored by Texas Osteopathic Medical  
Association, Oklahoma Osteopathic  
Association and Arkansas Osteopathic  
Medical Association  
Location: Harrah's Casino Hotel  
Lake Tahoe, Nevada  
Hours: 6 hours AOA Category 1-A  
Richard J. Langerman, D.O., Coordinator  
(Reservations must be made by September 12)  
Contact: Texas Osteopathic Medical  
Association  
512/388-9400 or 1/800-444-8662

### FEBRUARY 3-7, 1995

"Fifth Annual Update in Clinical Medicine  
for Primary Care Physicians"  
Sponsored by University of North Texas  
Health Science Center at Fort Worth  
Location: Lake Tahoe, Nevada  
Hours: 20 CME Hours – Category 1-A,  
AOA

Contact: Pam McFadden, Program Director  
(817) 735-2581

### FEBRUARY 10-12, 1995

TOMA 39th Annual Midwinter Conference  
and Legislative Forum  
"Primary Care includes OMT"  
Sponsored by Texas Osteopathic Medical  
Association  
Location: Doubletree Lincoln Centre  
Dallas, Texas  
Hours: 18 Hours Category 1-A, AOA  
Approved  
Contact: Texas Osteopathic Medical  
Association  
512/388-9400 or 1/800-444-8662

### 25-26

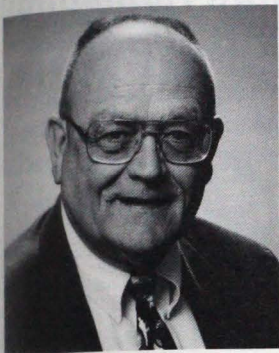
"Advanced Cardiac Life Support Course"  
Sponsored by Colorado Society of  
Osteopathic Medicine  
Location: Keystone Lodge & Resort  
Keystone, Colorado  
Hours: 15 hours AOA Category 1-A  
CME credit  
Contact: Patricia Ellis  
50 S. Steele Street, #440  
Denver, CO 80209  
303/322-1752; Fax 303/322-1956

### FEBRUARY 26-MARCH 3, 1995

Ski-CME Midwinter Conference  
Sponsored by Colorado Society of  
Osteopathic Medicine  
Location: Keystone Lodge & Resort,  
Keystone, CO.  
Hours: 38 hours AOA Category 1A CME  
credits; AAFP prescribed course  
hours  
Activities: Skiing, night skiing, cross country  
skiing, sleigh rides, banquet.  
Updates for family practitioners  
on orthopedics, gynecology,  
emergency medicine, infectious  
disease, physical medicine,  
cardiology and more.  
Contact: Patricia Ellis  
50 S. Steele St., #440  
Denver, CO 80209  
303/322-1752; Fax 303/322-1956

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





# President's Corner

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

TIOPA!! Sounds like a new automobile model, doesn't it? Or maybe a new battle cry like Geronimo!! Well, rest assured that it is not a new car. I suppose you could say it really may be a battle cry in the managed care wars that are facing us today.

Managed care, or call it whatever you like (I have heard it called managed competition and managed costs), is apparently here to stay. We must be prepared for it and all of its ramifications if we expect to survive in the current world of medical practice.

Several years ago, the terms HMO and PPO were foreign to us. As we gradually learned about them, we quickly grew to dislike them and found them to be distasteful to our established ways of practicing medicine. The HMO movement was insidious and caught most of us unaware and unprepared for it. Now, we find that if we do not belong to certain HMOs or managed care groups, we could lose our patients and the practice that we worked so hard and long to build.

Some of the issues we face today are:

1. Managed care/primary care/demands for cost discounts/higher quality
2. Advances in technology
3. Decreasing Medicare/Medicaid reimbursements
4. Movement toward capitation.

Those are not bad issues in themselves and are goals that we would like to achieve. The reality in this arena is that managed care groups are gaining control of the driver's seat, and on an individual basis, we cannot maintain the total control that we had in the past. There is an old saying, "There is strength in numbers." Maybe we should add "safety" to that old saying.

Managed care groups are organized and growing very fast. They are establishing specific criteria for quality of care, the numbers of primary care doctors vs. specialists, patient convenience and, certainly, lower costs to the business community. They are successful because they provide what the business community wants.

The numbers mentioned above in that old saying simply translates into this: the more physicians that join together to form a unified medical voice, the better the negotiating and bargaining power each physician will have. Alone, you cannot bargain very well, and you may not survive the changes in medicine as it will be practiced in the future.

Getting back to TIOPA, I want you to know right off the top that it is not an entity that is competing with TOMA. Some of our members have asked me the question, "Is this a new association to replace TOMA?" **No, it is not!** TOMA is not legally structured to engage in the marketing and business development of an IPA. In

---

***"TOMA is not legally structured  
to engage in the marketing and  
business development of an IPA"***

---

addition to the legal issue, it does not have the money, the expertise or personnel to become an independent practice association (IPA). TIOPA is a state-wide independent practice association that serves only the osteopathic physicians in Texas. It began as a local IPA in Tarrant County back in 1987. It is physician directed, and its president is Larry Burrows, D.O., who has served on the TOMA Board of Trustees. It began as FWIOPA and has now expanded into TIOPA (Texas Independent Osteopathic Physicians Association) to serve all D.O.s in Texas.

It has been established to offer participating osteopathic physicians an organized negotiating presence. It is being managed and marketed by the Osteopathic Health Group, Inc. (OHG) which employs many talented persons experienced in business development, contract negotiation and managed care contracting. TIOPA will arrange for physicians to provide care to patients across Texas through its statewide network. This IPA is the successful culmination of efforts between OHG and TOMA.

There is a small application fee (\$200 - some IPAs are charging as much as \$20,000 to join), and some reasonable criteria that a physician must meet in order to become a member. The fee and criteria are designed to make it as easy as possible for any D.O. to belong. We have over 2,000 osteopathic physicians in our state and we need to have all of them in this organization in order to be able to better represent each one. With this unity, we can have the strongest possible bargaining and marketing ability.

TIOPA assures you that you get to keep the autonomy of your individual or group practice. It will negotiate for

*(continued on page 6)*



## President's Corner, *Continued*

you with the insurance companies, HMOs and third party organizations; not control your practice. TIOPA will aid in preserving the identity of the osteopathic profession. Managed care nationally is seeking 65 percent primary care and 35 percent specialists. The osteopathic profession is already at that level and, therefore, is ahead of the pack and is logically the front runner in contemporary medicine.

Michael Ranelle is the person from OHG who is making contact with D.O.s around the state. He has visited with quite a number of our physicians and stands ready to meet with anyone who is interested. Give him a call at (817) 377-8046 or 1-800-725-6628.

According to a recent article in the *Fort Worth Star-Telegram*, Harris Methodist Health Plan stated that 23 percent of the population of Tarrant County currently belongs to an HMO and chooses doctors from insurers' lists. Harris thinks that number will double in the next five years. The story is the same or similar in other areas of the state as well.

Let us face reality. Medicine is changing rapidly. Either we change with it, or we get left behind. If we get left behind, we stand the chance of losing our patients, and/or being denied the opportunity to join managed care groups in the future.

Don't let it happen to you - join TIOPA! ■

## NBOME Fee Schedule Adjustments

*The Osteopathic Examiner*, a publication of the National Board of Osteopathic Medical Examiners, Inc., reports that the NBOME has recently adjusted the examination and administration fees. The following is the new schedule effective immediately.

### Examination Fees

Part I	\$200
Part II	\$200
Part III	\$300
Part III retake	\$270

### Other Examination Fees (non-refundable)

Cancellation Fee	\$ 25
Change of Test Site	\$ 25
Late Processing Fee	\$ 30
Extended Late Fee	TBA during registration

### Other Administration Fees

Handgrading	\$ 50
Transcripts	
Part I	\$ 15
Part II	\$ 15
Parts I, II & III	\$ 40
Score Report photocopy	\$ 5

## THANKS TOMA-PAC CONTRIBUTORS

*Your contributions will have a critical impact in 1995  
as we defend osteopathic physicians against:*

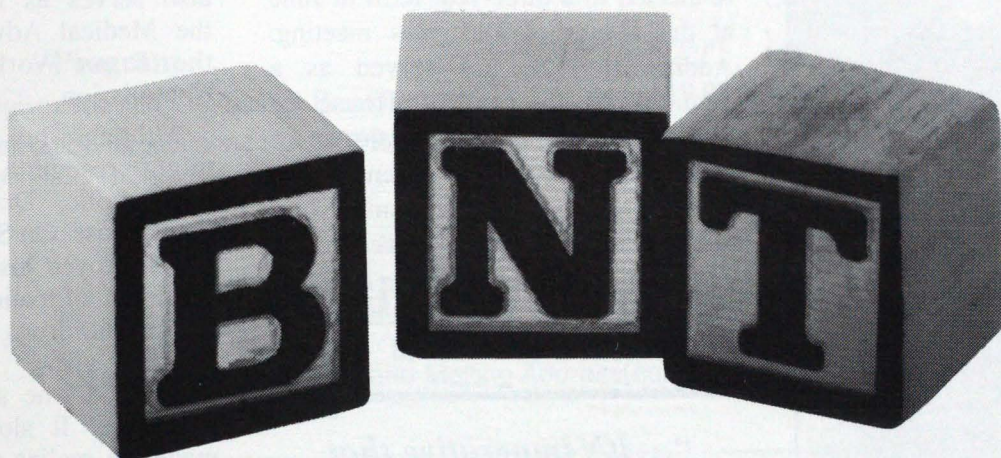
- *Independent Practice Privileges for Advanced Nurse Practitioners*
  - *DEA Numbers for Chiropractors*
  - *Discrimination by Hospitals & Managed Care Organizations*
- Just to list a few!!!*

THE level of legislative influence YOUR ASSOCIATION HAS is largely dependent upon OUR support of key legislators. THOSE who HAVE given to TOMA-PAC this year UNDERSTAND THE REWARDS of CONTRIBUTING. PLEASE ENCOURAGE YOUR COLLEAGUES to SUPPORT THE OSTEOPATHIC PROFESSION and THE ASSOCIATION which CONTINUES to PROMOTE and DEFEND its MEMBERS and NON-MEMBERS.

TOMA-PAC  
1717 NORTH I.H.-35, Suite 100  
Round Rock, TX 78664-2901  
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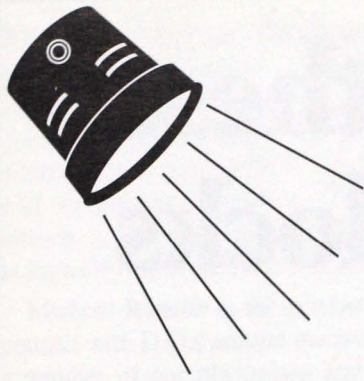
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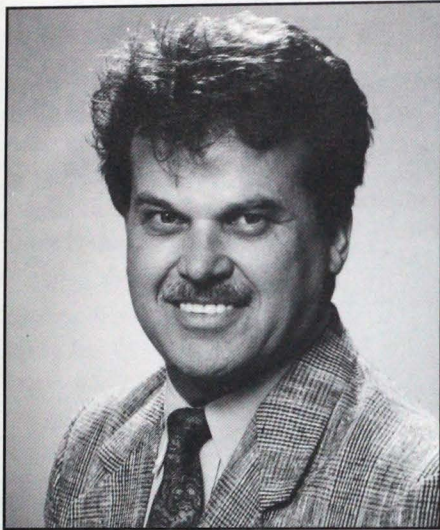






# SPOTLIGHT TOMA Board of Trustees

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



**Jim W. Czewski, D.O.**

Dr. Jim Czewski of Fort Worth readily admits that his involvement in osteopathic-related activities takes up a fair amount of time. "It is a lot of work," he notes. However, his strong commitment to the osteopathic profession is evident as he adds, "If we don't all chip in and do whatever is necessary, our profession would not be as strong as it is today."

"With such issues as health care reform and managed care facing us today, whatever the outcome, it's imperative that we all do our part to assure that the quality of health care in this country remains superior to that of other nations."

Certified in Family Practice by the American Osteopathic Board of Family Physicians, Dr. Czewski has been in private practice in Fort Worth since 1980.

An active member of the Texas Osteopathic Medical Association, Dr. Czewski has served as a member of the Board of Trustees since 1990, and was

re-elected to a three-year term in June at the House of Delegates meeting. Additionally, he has served as a member of the TOMA House of Delegates since 1985; is chairman of the Department of Development and Liaison; chairman of the Membership, Services and Professional Development Committee; member of the Finance Committee and the Governmental Relations Committee; and is first

---

***"...it's imperative that  
we all do our part to assure  
that the quality of  
health care in this country  
remains superior to that  
of other nations."***

---

alternate to the House of Delegates of the American Osteopathic Association. Dr. Czewski is also a sustaining member and a TOMA-PAC supporter. In 1987, he served as program chairman for TOMA's 88th Annual Convention and Scientific Seminar.

Dr. Czewski is a 1977 Cum Laude graduate of Texas College of Osteopathic Medicine, and interned at Osteopathic Medical Center of Texas. He is also a registered pharmacist, practicing retail pharmacy prior to entering osteopathic medical school.

Additional memberships include TOMA District II, in which he has served as president, president-elect, vice president and secretary-treasurer; the American Osteopathic Association; the American College of Osteopathic Family Physicians; and the Texas Society of the ACOFP. Dr. Czewski

also serves as the representative to the Medical Advisory Committee of the Texas Workers' Compensation Commission.

Although his numerous activities might resemble the resume of a "workaholic," Dr. Czewski says this is not the case. On September 18, 1990, a fire destroyed his practice, consuming hundreds of patient medical records, equipment, drugs and medicines. "Our family grew from that tragic experience," he said. "It made a big difference. It slowed me down and made me realize that there is more to life than work."

Dr. Czewski and his wife, B.J., an active member of the Auxiliary to the Texas Osteopathic Medical Association and immediate past president, are the parents of Amber, age 14, and Alex, age 22. The family enjoys woodcraft and water sports.

He speaks glowingly of B.J.'s support and involvement in osteopathic activities which, he says, he "greatly appreciates. I believe all spouses should be as involved," he adds.

We extend our sincere appreciation to Dr. Czewski for all his work and efforts on behalf of the osteopathic profession.

## Consumer Group Urges FDA To Ban OTC Drug Used for Leg Cramps

Beginning in February, the Food and Drug Administration will ban over-the-counter sales of brands of quinine sulfate, used to treat night time leg cramps. Although the drug is effective against malaria, the Public Citizen Health Research Group contends it is dangerous when used to treat leg cramps.



# 3rd Annual Texas Health Professionals' Peer Assistance Conference

*Presented by the Liaison Committee on Health Care Professionals' Peer Assistance Programs*

Date: Saturday, October 29, 1994

Time: 8:00 a.m. - 4:45 p.m.

Location: Charter of Austin  
8402 Cross Park Drive  
Austin, Texas 78754-4588  
(512) 837-1800

9:00 - 12 Noon Developing and Utilizing Peer Assistance Programs - Brenda Blair, CEAP

12:00 - 1:00 p.m. Lunch

1:00 - 2:30 p.m. Identifying and Assisting Impaired Health Professionals - Kathie Rickman, RN, MSN, LCDC

2:30 - 2:45 p.m. Break

2:45 - 4:30 p.m. Legislative Considerations for Health Care Professionals - Hugh M. Barton, J.D.

4:30 - 4:45 p.m. Wrap-Up and Evaluations - Bob Hull

## Program

8:00 - 8:30 a.m. Registration and Continental Breakfast

8:30 - 9:00 a.m. Welcome; Introduction to LCHCPPAP  
Bob Hull, Th.M.

## REGISTRATION FORM

Name of Registrant(s) and Mailing Address(es) (Please print or type):

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Profession: \_\_\_\_\_

Registration Fee: \$40 registration if post-dated by October 22;  
\$60 after October 22.

Enclosed - remittance of \$\_\_\_\_\_ to cover the above registrant(s)

Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ American Express \_\_\_\_\_

# \_\_\_\_\_ Expiration date \_\_\_\_\_

\_\_\_\_\_  
Signature

MAIL TO  
Texas Pharmacy Foundation - Peer Assistance Conference  
c/o Texas Pharmaceutical Association  
Post Office Box 14709  
Austin, TX 78761



# Texas Hospitals Introduce New Interns and Residents

Recently graduated osteopathic physicians from osteopathic colleges across the United States have begun their training programs at Texas hospitals and medical centers.

Among the interns and residents training for the 1994-95 year are the following:

## BAY AREA MEDICAL CENTER (Corpus Christi)

**Susan Allen, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Chris A. Bell, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Esther G. Cruz, D.O.**  
KCOM – Family Practice Resident

**Paul T. Duncan, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Alan W. Elliot, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Yolanda Greene, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Keith R. Hurst, D.O.**  
UOMHS – Family Practice Resident

**Jeffrey D. Johnson, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Kevin J. Martin, D.O.**  
UOMHS – Family Practice Resident

**Scott D. Robinson, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Mary (Fran) Sanders, D.O.**  
WVSOM – Family Practice Resident

**Thomas C. Scherich, D.O.**  
WVSOM – Family Practice Resident

## BAY AREA MEDICAL CENTER (Corpus Christi)



Susan Allen, D.O.



Chris A. Bell, D.O.



Esther G. Cruz, D.O.



Paul T. Duncan, D.O.



Alan W. Elliot, D.O.



Yolanda Greene, D.O.



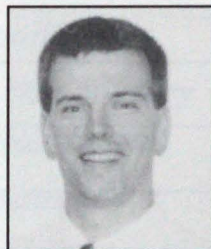
Keith R. Hurst, D.O.



Jeffrey D. Johnson, D.O.



Kevin J. Martin, D.O.



Scott D. Robinson, D.O.



Mary (Fran) Sanders, D.O.



Thomas C. Scherich, D.O.

## BROOKE ARMY MEDICAL CENTER (Fort Sam Houston)

**Mark A. Barnhardt, D.O.**  
KCOM – Categorical Pediatric Intern

**Kenneth E. Breeden, D.O.**  
OSU-COM – Transitional Year Intern

**Carmen Cetrone, D.O.**  
CCOM – Categorical Pediatric Intern

**Sellas P. Coble, D.O.**  
UNTHSC/TCOM – Categorical Medicine Intern

**David A. Dean, D.O.**  
UHS-COM – Emergency Medicine Resident

**Patrick J. Flaherty, III, D.O.**  
PCOM – Internal Medicine Resident

**Nicolo B. Geralde, D.O.**  
CCOM – Pediatric Resident

**Christos Hatzigeorgiou, D.O.**  
KCOM – Categorical Medicine Intern

**James P. Hendricks, D.O.**  
PCOM – Transitional Year Intern

**Timothy D. Law, Sr., D.O.**  
OUCOM – Categorical Pediatric Intern

**Allen Lewis, Jr., D.O.**  
WVSOM – Internal Medicine Resident

## BROOKE ARMY MEDICAL CENTER (Fort Sam Houston)

(Photos by U.S. Army)



Mark A. Barnhardt, D.O.



Kenneth E. Breeden, D.O.



Carmen Cetrone, D.O.



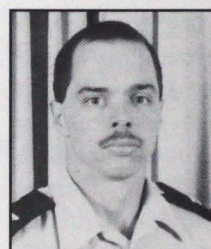
Sellas P. Coble, D.O.



Christos Hatzigeorgiou, D.O.



James P. Hendricks, D.O.



Timothy D. Law, Sr., D.O.



Richard H. Mansfield, D.O.



# **BROOKE ARMY MEDICAL CENTER, Continued**

**Craig Manifold, D.O.**  
PCOM – *Emergency Medicine Resident*

**Richard H. Mansfield, D.O.**  
SEUHS COM – *Transitional Year Intern*

**Mark A. Marconi, D.O.**  
PCOM – *Obstetrics & Gynecology Resident*

**Juan S. Pico, D.O.**  
NYCOM – *Internal Medicine Resident*

**David T. Schulz, D.O.**  
UHS-COM – *Internal Medicine Resident*

**Robert D. Stoffey, D.O.**  
COMP – *Radiology Resident*

**Philip J. Traino, Jr., D.O.**  
UNECOM – *Radiology Resident*

**Stephen J. Welka, D.O.**  
CCOM – *Categorical Medicine Intern*

**George K. Wilcox, D.O.**  
UNTHSC/TCOM – *Internal Medicine Resident*

**Timothy B. Williams, D.O.**  
SEUHS COM – *Pediatric Resident*



Stephen J. Welka, D.O.

## **DALLAS FAMILY HOSPITAL (Dallas)**

**Gilbert Aragon, D.O.**  
UHS-COM – *Family Practice Resident*

**Norma Cavazos-Salas, D.O.**  
KCOM – *Intern*

**Judith Cherry, D.O.**  
UNTHSC/TCOM – *Intern*

**Timothy Collins, D.O.**  
OSU-COM – *Family Practice Resident*

**Kenneth Dority, D.O.**  
KCOM – *Family Practice Resident*

**Simon Garza-Keever, D.O.**  
KCOM – *Family Practice Resident*

**Darren K. George, D.O.**  
UNTHSC/TCOM – *Family Practice Resident*

**Brent Harvey, D.O.**  
UNTHSC/TCOM – *Intern*

**Pohn Inthanousay, D.O.**  
UNTHSC/TCOM – *Intern*

**Monica L. Johnson, D.O.**  
UNTHSC/TCOM – *Intern*

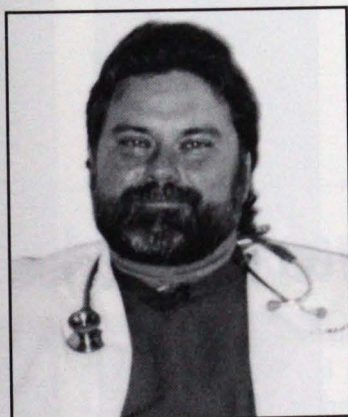
**Jack E. LaManna, D.O.**  
UNTHSC/TCOM – *Family Practice Resident*

**Michael "Skip" Landers, D.O.**  
UHS-COM – *Family Practice Resident*

**Thao (Anthony) Nguyen, D.O.**  
UNTHSC/TCOM – *Intern*



INTERN CLASS - 1994-95 – Seated from left to right: Pohn Inthanousay, D.O., and Norma Cavazos-Salas, D.O.; standing from left to right: Monica L. Johnson, D.O., Thao (Anthony) Nguyen, D.O., Judith Cherry, D.O., and Brent Harvey, D.O.



Jack E. LaManna, D.O.



FAMILY PRACTICE RESIDENCY – Seated from left to right: Kenneth Dority, D.O., Gilbert Aragon, D.O.; standing from left to right: Michael "Skip" Landers, D.O., Darren K. George, D.O., Timothy Collins, D.O., and Simon Garza-Keever, D.O.



**DOCTORS HOSPITAL**  
(Groves)

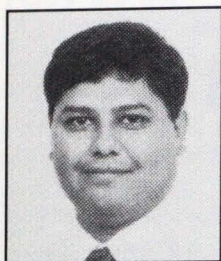
**Raquel Bolado, D.O.**  
OUCOM – Intern

**Felice Crowder, D.O.**  
UNTHSC/TCOM – Intern

**William Mizell, D.O.**  
KCOM – Family Practice Resident

**Sergio Zamora, D.O.**  
COMP – Intern

**JOHN PETER SMITH HOSPITAL**  
(Fort Worth)



**Frank Guajardo, D.O.**  
UNTHSC/TCOM – Intern

**METHODIST MEDICAL CENTER**  
(DALLAS)

**Ana Elisa Corteguera, D.O.**  
UNTHSC/TCOM – Resident

**Stephan M. Kramer, D.O.**  
UNTHSC/TCOM – Intern

**NORTHEAST COMMUNITY HOSPITAL**  
(Bedford)

**Joseph Berger, D.O.**  
UNTHSC/TCOM – Intern

**Donald Brock, D.O.**  
UHS-COM – Family Practice Resident

**Debbie Crawford, D.O.**  
UNTHSC/TCOM – Intern

**George L. Franklin, Jr., D.O.**  
OUCOM – Family Practice Resident

**Mary Dennis Kretzer, D.O.**  
UOMHS – Family Practice Resident

**Mary K. Mills, D.O.**  
OSU-COM – Family Practice Resident

**Robbye Richards, D.O.**  
UNTHSC/TCOM – Family Practice Resident

**Sally Scheel, D.O.**  
UNTHSC/TCOM – Intern

**James M. Webb, D.O.**  
KCOM – Family Practice Resident

**OSTEOPATHIC MEDICAL CENTER**  
**OF TEXAS**  
(Fort Worth)

**Steve Bishop, D.O.**  
UNTHSC/TCOM – Family Practice

**Mark D. Ford, D.O.**  
CCOM – Family Practice

**Robin S. Garrett, D.O.**  
WVSOM – Intern

**Jill Gramer, D.O.**  
OSU-COM – Family Practice

**Michael W. Houck, D.O.**  
UNTHSC/TCOM – Intern

**Shaun Kretzschmar, D.O.**  
UNTHSC/TCOM – Family Practice

**William J. Lagaly, D.O.**  
UNTHSC/TCOM – Family Practice

**Samuel C. Lee, D.O.**  
UOMHS – Family Practice

**Claire McKay, D.O.**  
UNTHSC/TCOM – Intern

**Timothy F. Malone, D.O.**  
UOMHS – Intern

**Arax Nazarian, D.O.**  
UNTHSC/TCOM – Family Practice

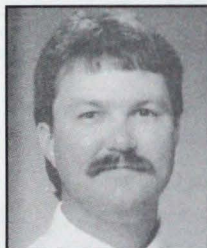
**Trayce Orr, D.O.**  
UNTHSC/TCOM – Internal Medicine



**Robin S. Garrett, D.O.**



**Jill Gramer, D.O.**



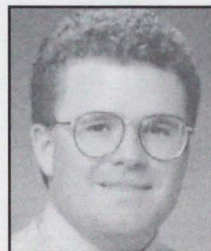
**William J. Lagaly, D.O.**



**Claire McKay, D.O.**



**Trayce Orr, D.O.**



**Shawn Parsley, D.O.**



**Raewyn D. Shell, D.O.**



**David A. Tilles, D.O.**

**Shawn Parsley, D.O.**  
UNTHSC/TCOM – Family Practice

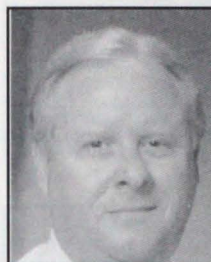
**Shirley R. Richards, D.O.**  
UOMHS – Internal Medicine

**Scott A. Russell, D.O.**  
UNTHSC/TCOM – Intern

**Raewyn D. Shell, D.O.**  
UNTHSC/TCOM – Family Practice

**David A. Tilles, D.O.**  
UNTHSC/TCOM – Intern

**John M. Ward, D.O.**  
UNTHSC/TCOM – Internal Medicine



**Steve Bishop, D.O.**



**Mark D. Ford, D.O.**



**Michael W. Houck, D.O.**



**Shaun Kretzschmar, D.O.**



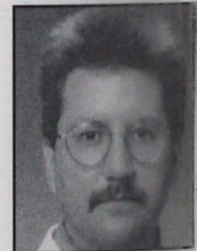
**Timothy F. Malone, D.O.**



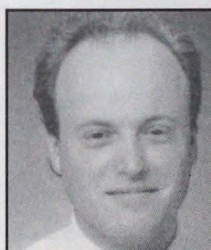
**Arax Nazarian, D.O.**



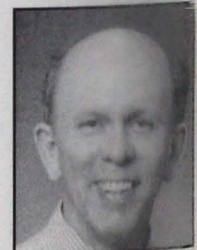
**Shirley R. Richards, D.O.**



**Scott A. Russell, D.O.**



**Samuel C. Lee, D.O.**



**John M. Ward, D.O.**



## PRESBYTERIAN HOSPITAL OF DALLAS



**Martha Danhof, D.O.**  
UNTHSC/TCOM – Internal Medicine Resident

## SCOTT & WHITE MEMORIAL HOSPITAL (Temple)

**Justin Powell, D.O.**  
UNTHSC/TCOM – Internal Medicine Resident

## ST. PAUL MEDICAL CENTER (Dallas)



**Cheryl Ann Bray, D.O.**  
UNTHSC/TCOM – Internal Medicine Resident



**Stephen R. Slaughter, D.O.**  
UOMHS – Internal Medicine Resident

## TEXAS TECH HEALTH SCIENCES CENTER (El Paso)

**Rafael Armendariz, D.O.**  
UOMHS – Intern

**William Beazley, D.O.**  
UHS-COM – Resident

**Michael S. Bleyberg, D.O.**  
UOMHS – Resident

**Jeffrey M. Calava, D.O.**  
OSU-COM – Resident

**Craig C. Cameron, D.O.**  
PCOM – Resident

**Karen M. Carr, D.O.**  
UNTHSC/TCOM – Intern

**Mark F. Gan, D.O.**  
UNTHSC/TCOM – Resident

**Soheil Goravanchi, D.O.**  
UNTHSC/TCOM – Resident

**Elizabeth Groshong, D.O.**  
COMP – Resident

**Gordon H. Hsieh, D.O.**  
UOMHS – Resident

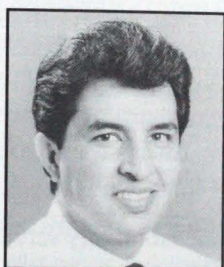
**Randy Large, D.O.**  
COMP – Resident

**Philip Scaglione, D.O.**  
PCOM – Resident

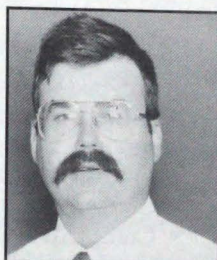
**Saan Simon, D.O.**  
UNTHSC/TCOM – Resident

**Brian K. Steele, D.O.**  
UHS-COM – Resident

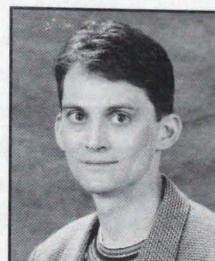
**Glen Villanueva, D.O.**  
UHS-COM – Resident



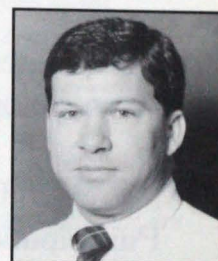
**Rafael Armendariz, D.O.**



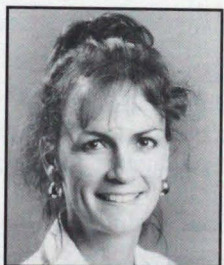
**William Beazley, D.O.**



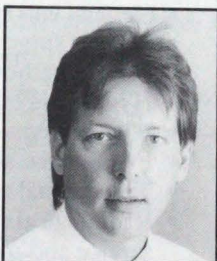
**Jeffrey M. Calava, D.O.**



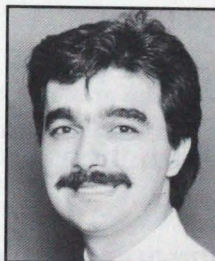
**Craig C. Cameron, D.O.**



**Karen M. Carr, D.O.**



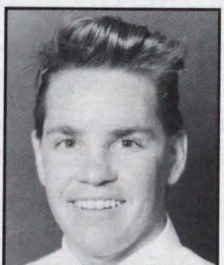
**Mark F. Gan, D.O.**



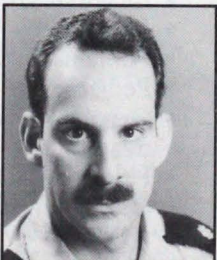
**Soheil Goravanchi, D.O.**



**Gordon H. Hsieh, D.O.**



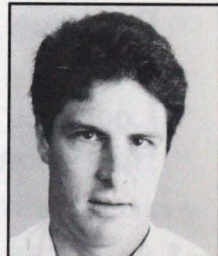
**Randy Large, D.O.**



**Philip Scaglione, D.O.**



**Saan Simon, D.O.**



**Brian K. Steele, D.O.**

# Researchers Discover Gene Responsible for Breast Cancer

Researchers at the University of Utah and Myriad Genetics Inc., of Salt Lake City, have identified the defective gene believed to cause approximately one-half of all inherited cases of breast cancer. Additionally, the approximate location of a second gene, believed to be responsible for the remaining cases of inherited breast cancer, has been identified by another team of researchers. Although breast cancer overall is the second most common cause of death by

cancer in women, only five percent of breast cancers are the inherited type. Nevertheless, these findings represent a major advance in the efforts to understand the biology of the disease.

Dr. Harmon Eyre, chief medical officer of the American Cancer Society, noted, "We actually know very little about what causes breast cancer. This is a real first step in getting to the bottom of what it is all about."



# Supporting osteopathic physicians across Te

- Medical Staff Privileges at Osteopathic Medical Center of Texas
- Independent Practice Association Membership
- Managed Care Program Participation
- Occupational Health Programs
- Physician Information Resource
- Osteopathic Marketing Programs
- Localized Community Educational Services
- Accounts Receivable Management Services/Data Processing
- Continuing Medical Education Programs
- Physician Resource Network
- Access to all OHST Services and Affiliates

## Affiliated Services

### *Osteopathic Medical Center of Texas*

1000 Montgomery

(817) 731-4311

Referral line: 1-800-299-CARE (2273)

- 265-bed regional referral hospital
- 24-hour emergency department services
- Intensive care unit (ICU)
- Cardiac care unit (CCU)
- Complete diagnostic laboratory services
- Cardiac rehabilitation
- Comprehensive maternity services
- General and specialty surgery
- Cardiac surgery
- Cardiac catheterization
- Hyperbaric oxygen therapy
- Wound treatment center
- Full-service adult psychiatric treatment
- Transitional care unit
- Radiological services, including X-ray service and magnetic resonance imaging (MRI)
- Electrodiagnostics services
- Angioplasty
- Pulmonary diagnostic services
- Pediatric unit
- Oncology unit with chemotherapy treatment
- Hemodialysis
- Osteopathic manipulative medicine (OMM)
- Outpatient services
- Patient advocacy
- Rehabilitation services, including physical and occupational therapy
- Wellness services
- Patient education department
- Home health care
- Helipad for air ambulance service

### *CareLink*

3715 Camp Bowie Boulevard

(817) 735-DOCS (3627)

- 24-hour regional referral center
- Information and health referral center
- Physician referral service
- Nursing home referral service

### *One Day Surgery Center, Ltd.*

1001 Haskell

(817) 735-35

- Complete outpatient facility
- Specialized care
- Convenient location
- Easy, free parking

### *Diagnostic Imaging Centre/Novus Breast Center*

3825 Camp Bowie Boulevard

(817) 737-58

- Outpatient X-ray service
- Mammograms
- Breast care education
- Patient van service
- Preliminary reports same day by phone or fax; written reports within 48 hours

### *The Health & Fitness Connection*

6242 Hulen Bend Boulevard

(817) 346-61

- Medical director on site
- Complete health and fitness facilities
- Fitness programs and educational seminars open to public and members
- State-of-the-art equipment/indoor pool
- Exercise and training programs

### *Carswell Osteopathic Medical Plan (COMP)*

3715 Camp Bowie Boulevard

(817) 263-COMP (266)

- An Osteopathic Health Group program for military (active, retired, reserve) and their family members
- Physician network of OHST health care services
- Discounts on dental services and medications



C  
S.

### LE Club (Adult Prevention Program for Life Enhancement)

3715 Camp Bowie Boulevard  
(817) 377-APPLE (2775)

health prevention information

health fairs and special

count pharmacy

-cost group dental plan and  
dental services

community services and discounts

### Medical Center Pharmacy

3601 West Seventh  
(817) 738-1883

insurance claim filing, including

AMPUS

delivery

complete prescription drug

ward-keeping

### Capital Corporation

4916 Camp Bowie Boulevard  
(817) 763-8706

all business investment (SBIC)

to health care professionals for

ices, equipment, etc.

equity capital for qualified

all businesses

### Health Care/IV Infusion

4916 Camp Bowie Boulevard  
(817) 377-4663

illed nursing care

specialized services

available seven days a week

hour telephone assistance

### Management Company, Inc.

One Summit Avenue, Mallick Tower  
(817) 334-0131

accounts receivable management

management/consulting



### About Our System...

*Osteopathic Health System of Texas provides this network of hospital and allied services to osteopathic physicians across Texas for a very good reason: to help provide quality health care in the fast-changing medical environment of the '90s.*

*All these services are built on a philosophy pioneered more than 100 years ago by Andrew Taylor Still, founder of osteopathic medicine.*

*And that philosophy, which is coming more and more into focus as the rest of the world catches up to it, is simple. It views patients as individuals, each with unique needs that are best met when they work in partnership with their physicians.*

*This means patients see physicians before they get sick. It means preventive medicine. It means getting people well and keeping them that way. It's why we keep saying "Prevention Works Wonders."*

*We invite osteopathic physicians across Texas to join us in this important and growing health care network. It's rooted in a 100-year-old tradition that will work wonders well into the 21st century.*

### When you refer your patients to OMCT:

- You remain the family physician of record.
- You maintain complete access to your patient's records.
- You can monitor your patient's care 24 hours a day on our toll-free telephone line, 1-800-725-OMCT (6628).
- Your practice philosophy is reflected at our exclusive osteopathic medical center.
- Your patient is referred back to you for continued osteopathic care after hospital treatment is completed.

### While your patient is at OMCT, family members receive special assistance, including:

- Special hotel rates.
- Free shuttle from hotel to OMCT.
- Free counseling services 24 hours a day.
- One free meal per day in cafeteria.

**For more information or to schedule a patient for services, contact CareLink 24 hours a day at 1-800-299-CARE (2273).**

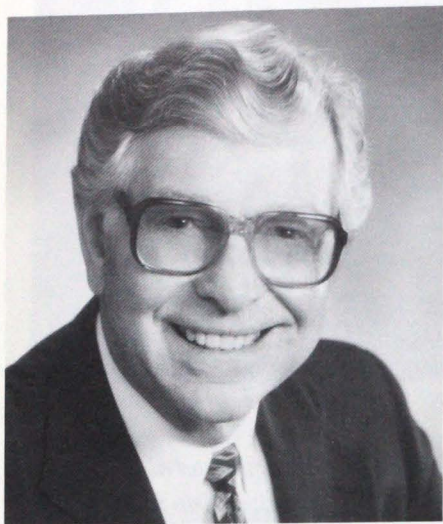


**Osteopathic Health System of Texas**

3715 Camp Bowie Boulevard • Fort Worth, Texas 76107



# TOMA Member Plans Strategy for ACOFP In 1995



Robert G. Maul, D.O., FACFP

Robert G. Maul, D.O., FACFP, of Lubbock, was elected president-elect of the American College of Osteopathic Family Physicians (ACOFP), during the ACOFP's 31st Annual Meeting in March.

He will be installed as ACOFP President on March 19, 1995, in Dallas and as such, has been making plans as to what he hopes to accomplish as the organization's next president.

A major priority, he says, is "to make sure that all osteopathic family practitioners are aware of the three possible crises in health care: 1.) the skyrocketing cost; 2) the lack of access; and 3) the unacceptable health status measures.

"I also feel," he added, "that our emphasis as to the future of our health care system ought to be 1) primary care and prevention; 2) targeting managed care problems; 3) cost effective care; 4) the consumer's orientation; and 5) integrated services, which is the delivery."

In speaking of the ACOFP's role in managed care, Dr. Maul stated, "I feel that our role at ACOFP is to see how the osteopathic physicians can fit into the managed care programs, and to make sure that there is no prejudicial procedures used in keeping osteopathic physicians out of any type of managed care programs."

"I also think that the ACOFP should continue our educational programs and make sure that every D.O. in the osteopathic profession is certified. I think that this is crucial to our future as well as giving our basic review sessions on a yearly basis is essential," he noted.

Regarding how Texas fits into the ACOFP's role in managed care, Dr. Maul believes that "Texas D.O.s fit into this picture exactly the way the national osteopathic physicians fit in. We need to be ensured that all of us in Texas are certified and that we all are able to fit into any type of hospital program where any other physician is allowed to practice."

A 1969 graduate of Kirksville College of Osteopathic Medicine, Kirksville, Missouri, Dr. Maul is certified in family practice. He has practiced in Lubbock since 1970.

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***"We ought to make sure  
that we never forget  
our basic background  
and this is, that we are  
a distinct profession..."***

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He has been extremely active in both the ACOFP and the Texas Society of the ACOFP throughout the years, and currently serves as secretary of the Conclave of Fellows of the ACOFP, a position he has held since 1983. From 1982-83, he served as president of the Texas Society of the ACOFP, and was named "Family Practitioner of the Year" for 1994 during their 37th Annual Convention and 21st Mid-year Clinical Seminar, held in August.

Dr. Maul served as TOMA president from 1983-84, as a member of the TOMA Board of Trustees from 1972-82 and was named "Family Practitioner of the Year" in 1981. He is also a member of the American Osteopathic Association; TOMA District X, in which he is a past president; Texas Medical Foundation; and the American Physical Therapy Association.

Founded in 1953, the over-14,000 member American College of Osteopathic Family Physicians is located in Arlington Heights, Illinois. The executive director is Mr. George Nyhart. It's mission is to promote and advance the standards of family practice in the field of osteopathic medicine and surgery; to be the leader in the osteopathic profession in the provision of primary care; to promote access to health care to the American public; to enhance the understanding by the public of services rendered by osteopathic family physicians; and to encourage and improve the educational opportunities

for the training of family physicians in osteopathic medicine and surgery.

The Texas Osteopathic Medical Association extends best wishes to Dr. Maul as he makes preparations to assume the ACOFP presidency in March. We would also like to express our pride in having such a dedicated D.O. in Texas. As Dr. Maul states, "We ought to make sure that we never forget our basic background and this is, that we are a distinct profession and that our osteopathic techniques and philosophy ought to be exercised throughout our daily practice."

## CHAMPUS Covers Living-Related Donor Liver Transplantation

Effective August 1, 1992, the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) will share the cost of living-related donor liver transplantation for patients with end-stage hepatic failure when more conservative therapies have failed.

Patients must receive pre-authorization from the CHAMPUS Medical Director, meet CHAMPUS selection criteria, and must not have other medical problems, in addition to hepatic failure, that would jeopardize successful transplantation. The procedure must be performed at CHAMPUS- or Medicare-approved liver transplantation centers.

CHAMPUS cannot share the cost of any transplantation paid for by research funds, nor for any medications that have not received Food and Drug Administration approval.

Providers who need specific information about patient or facility requirements should write to:

**David F. Bogner, M.D.**  
**Medical Director, OCHAMPUS**  
**Aurora, Colorado 80045-6900**



# Convocation 1994



*Peggy Fisher, winner of the Mary E. Luibel Distinguished Service Award, and Anthony J. Cortese, D.O., winner of the Founders' Medal, at Fall Convocation ceremonies at the University of North Texas Health Science Center at Fort Worth. The awards, the highest bestowed by the health science center, were presented September 9 during Convocation to welcome the new students.*

New students were officially welcomed to the Texas College of Osteopathic Medicine and the Graduate School of Biomedical Sciences during Fall Convocation ceremonies September 9 at the University of North Texas Health Science Center at Fort Worth.

The students wore their white lab coats and filled several rows of the Main Auditorium to see the presentation of the health science center's highest awards, the Founders' Medal and Mary E. Luibel Distinguished Service Award.

This year's Founders' Medal winner, Anthony J. Cortese, D.O., of Portland, Oregon, has been a practicing obstetrician-gynecologist since 1957. The Founders' Medal was established in 1978 to honor TCOM's founders, George J. Luibel, D.O., Carl E. Everett, D.O., and D.D. Beyer, D.O. The medal is presented each year to individuals in recognition of significant contributions to health care and osteopathic medical education.

Cortese is a fellow in the American College of Osteopathic Obstetricians and Gynecologists and a diplomate of the American Osteopathic Board of Obstetrics and Gynecology. He has been a member of the Federation of State Medical Boards of America since 1972 and received the Federation's Distinguished Service Award this year. He also is a member of the United States Medical Licensing Board and the National Board of Medical Examiners.

Cortese told the students that, when he was a freshman, he hadn't realized the importance of licensure. But later, as a

board member of the USMLB and NBME, Cortese said he sometimes had to "deny physicians the honor of ever taking another exam because they got caught cheating."

He cautioned them against cheating and told them to stay focused on their goal.

"You're going to be working hard, you're going to be studying hard and you're going to put in a lot of work," Cortese said, adding that it will be worth the effort when they become doctors.

This year's winner of the Mary E. Luibel award, established last year to honor the wife of co-founder George Luibel, was given to Peggy Fisher. The award recognizes distinguished service to the winner's profession, business or vocation and a longstanding dedication to the advancement of the osteopathic profession.

Fisher and her husband, Roy Fisher, D.O., were ground-breakers in the profession when they opened Fort Worth's first osteopathic hospital in the bottom floor of their house on Summit Street in the 1940s. Fisher was credited with running the hospital's operations while raising five children. She later co-founded the Osteopathic Medical Center of Texas Guild. In 1988, Fisher received the Presbyterian Women's Lifetime Membership Award from Ridglea Presbyterian Church, one of many organizations that have benefited from her involvement.

"Pioneering in the osteopathic profession was a great experience," Fisher told the crowd after receiving her medal from her longtime friend, Mary Luibel.

"As I stand here today, I see the big buildings of the hospital on one side and the medical school on the other, and I can hardly believe how far we've come," she said. "You students who are here today, four years are going to go by real fast. Don't forget that you're osteopathic physicians and God bless you."

Health science center President David M. Richards, D.O., told the audience, "Our future and our past are personified by those we recognize today."

To the students, he said, "TCOM leads all medical schools in Texas in producing primary care physicians. We also encourage you to follow the career of your choice, but build on the solid foundation of the liberal arts medical education that you are receiving here."

University of North Texas Chancellor and President Alfred Hurley, Ph.D. said, "No profession can have a future unless it recognizes those who have gone before and set the tone for the past, present and future."

Thomas Yorio, Ph.D., dean of the Graduate School of Biomedical Sciences, and Grant Gibson, president of the Graduate Student Association, pointed out how far the graduate program has come at the health science center in a short time. Shirat Ling, president of the TCOM Class of '98, made the audience laugh with her reading of a list of "Top Ten Things About Being a Freshman."

And Mary Luibel was awarded with the first Mary E. Luibel Distinguished Service Award medal, cast in her likeness. Because of time limitations last year when the award in her name was established, the medal had not yet been cast.

After the ceremonies, the audience attended a reception in the Atrium. ■



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

• **The Impossible Task.** It is to design a health care package that will appeal to the Clinton Administration and a majority of Congress. Although many are trying, no one seems to be succeeding at this time. There is a growing sense that no health care reform package will pass this year.

• **The Mitchell Plan.** In August, Senator George Mitchell unveiled his compromise health care plan which would eliminate the mandate for employer-provided insurance and require that at least 95% of the population be provided insurance protection by the year 2000.

• **Ugly Numbers.** Shortly after the announcement of the Mitchell Plan, the Congressional Budget Office issued a report that showed that total health care spending under the Mitchell Plan would increase from its current level of 14% of gross domestic product to 21% by the year 2004. That's more than is projected if no legislation is enacted.

• **The Mainstream Coalition.** A bipartisan group of senators, named the "Mainstream Coalition," recently presented a watered-down health care plan which would eliminate the employer mandate and drastically scale back subsidies for uninsured individuals. Strong criticism immediately came from many liberal members of Congress.

• **Independent Contractors Beware.** A major spinoff of the health care reform push has been a strong focus on the classification of employees and independent contractors. It is clearly possible that even if health care reform does not pass, some move may be taken to lift the restrictions that now make it difficult for the IRS to deal with the employee/independent contractor issue.

• **Big Dollars at Stake.** If the restrictions on the IRS to deal with the independent contractor issue are eliminated and more definitive regulations are issued and enforced, the government could generate an additional \$34.7 billion in employment taxes between the years 1996 and 2004. So says a recent study by Coopers & Lybrand.

• **Potential Tax Breaks.** Many are speculating that the Clinton Administration will propose some important tax

breaks before the re-election campaign begins. Likely proposals include a \$500 per child tax credit, a reduction in a capital gains rate to 20%, and an expansion of the individual retirement account participation rules.

• **Scary Projections.** Unless Social Security and Medicare benefits are reduced or taxes raised, the Social Security and Medicare programs will run out of money in the first quarter of the 21st century. So says a recent report of the Bipartisan Commission on Entitlement and Tax Reform. According to the report, the FICA tax which supports these programs will need to at least double by the year 2030 in order to maintain the current level of benefits offered under these programs.

The report comes to the obvious conclusion that reforms must be implemented soon to avoid a serious deficit for future generations.

• **A Trillion Dollar Debt.** Although Congress, over the years, has focused on maintaining full funding of private pension plans, it has ignored the funding deficits of government-sponsored plans. A member of the House Ways and Means Committee recently noted that the two largest federal pension plans, the Civil Service Retirement and Disability Fund and the Department of Defense Military Retirement Plan, are unfunded by over a trillion dollars as of 1993.

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

## TOMA Leaders In The News

• Robert L. Peters, Jr., D.O., was elected a member of the Board of Trustees of the American Osteopathic Association, during their recent House of Delegates meeting in Atlanta, Georgia. A board-certified family physician, Dr. Peters has been on the staff of the Round Rock Clinic for 22 years.

• TOMA President T. Eugene Zachary, D.O., was re-elected Speaker of the House of Delegates of the American Osteopathic Association. He serves as associate professor of family medicine at the University of North Texas Health Science Center's Texas College of Osteopathic Medicine. Dr. Zachary has served as AOA speaker for more than 11 years.

• Jeffrey A. Stone, D.O., has been named a member of the Board of Directors of the American Diabetes Association, Texas Affiliate. Dr. Stone is associate medical director of the Hyperbaric Medicine Unit at Presbyterian Hospital of Dallas.

• Gerald P. Flanagan, D.O., of Argyle, has been appointed a member of the Advisory Subcommittee on Nursing Facilities of the Texas Department of Human Services. Certified in family practice and quality assurance, Dr.

Flanagan is currently involved in committee work and locum tenen services.

• Samuel T. Coleridge D.O., has been nominated to serve another term on the Family Practice Residency Advisory Committee of the Texas Higher Education Coordinating Board. Certified in both family practice and emergency medicine, Dr. Coleridge practices in the department of general and family practice at UNTHSC/TCOM.

### Annual Convention Discount Announced

In addition to the numerous other benefits available from TOMA, we would like to offer a new incentive to all TOMA members. By referring a new member to TOMA, you will receive \$50.00 off your registration fee at the Annual Convention for each new member recruited. This referral must be noted on the application form of the new member. This offer begins October 1, 1994. Call the TOMA membership secretary for application forms.



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# In Memoriam

## LAWRENCE B. GREIF, D.O.

Dr. Lawrence B. Greif of Fort Worth passed away September 4. He was 72 years of age. Funeral services were held September 8 at Robertson Mueller Harper-Eighth Avenue, Fort Worth, with burial in the Beth El section of Greenwood Memorial Park, Fort Worth.

Dr. Greif was born in Brooklyn, New York. He received a bachelor of science degree in physics from Queens College and was an advanced phase physics graduate of Oregon State College. He served during World War II in the South Pacific.

In 1949, Dr. Greif invented the Pneumotokodynamometer, an external device used to record intra-uterine pressures, which is still used today.

A 1950 graduate of Philadelphia College of Osteopathic Medicine, he interned at Crown Heights Hospital in New York. He moved to Texas in the 1950's and joined TOMA in 1956.

Throughout the years, Greif had a private practice; served as company physician for Finger Furniture Company; was chief-of-staff at White Settlement Hospital; and practiced in the general practice department of Osteopathic Medical Center of Texas. He was a fellow of the American College of Utilization Review Physicians and a diplomate of the American Board of Quality Assurance and Utilization Review Physicians. He had retired from practice in March of 1993.

Dr. Greif was a life member of the Texas Osteopathic Medical Association, serving as a member of the Public Relations Committee and the Hospitals, Insurance and Peer Review Committee; a life member of TOMA District XV, serving as president in 1976; life member of the American Osteopathic Association; life member of the New York State Osteopathic Society; and member of the Southwest Medical Association. Additional memberships included the American College of Medical Quality; American College of Physician Executives; and member of the New York Academy of Sciences. Dr. Greif was the charter president of the Northside Fort Worth Civitan International, a local charitable organization.

Survivors include his wife, Maxine Greif of Fort Worth; three sons, Douglas Greif of San Francisco, Thomas Sims of Fayetteville, Arkansas, and Sam Greif of Granbury; three daughters, Theresa Huseman and Nelwyn Russell, both of Fort Worth, and Rose Callahan of Grapevine; three brothers, Herbert Greif of Boston and Donald Greif and Stanley Greif, both of Los Angeles; sister, Mildred Greif of Las Vegas; and 11 grandchildren.

The family suggests that memorials be made to the Women's Haven of Fort Worth.

TOMA extends condolences to the family and friends of Dr. Greif.

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# Memorandum

Date: July 6, 1994

From: Director  
Office of Payment Policy, BPD

Subject: Policy Issues Related to Osteopathic Manipulative Treatment

To: All Associate Regional Administrators for Medicare

We have been asked to clarify how osteopathic manipulative treatment (OMT) and evaluation and management (E/M) services provided on the same date are to be reported and paid. We have heard allegations that some carriers are routinely rejecting claims submitted with both an E/M code and an OMT code.

In addition, we have been asked to clarify how OMT is reported and whether it is necessary for OMT and an E/M service on the same date to be unrelated to each other in order for payment to be made for both services. To reiterate previous directives and to further clarify our policies, please note the following:

1. CPT 1994 includes new codes for OMT. They replace HCPCS codes M0702 - M0730 which have been deleted and are no longer valid. The CPT codes and the introductory paragraphs preceding them are as follows:

"Osteopathic manipulative treatment is a form of manual treatment applied by a physician to eliminate or alleviate somatic dysfunction and related disorders. This treatment may be accomplished by a variety of techniques.

Body regions referred to are: head region; cervical region; thoracic region; lumbar region; sacral region; pelvic region; lower extremities; upper extremities; rib cage region; abdomen and viscera region.

98925	Osteopathic manipulative treatment (OMT); one to two body regions involved
98926	three to four body regions involved
98927	five to six body regions involved
98928	seven to eight body regions involved
98929	nine to ten body regions involved"

These are the correct codes to report OMT services. OMT should not be reported by physicians with the codes in the Physical Medicine section of CPT (97260 and 97261) and claims for OMT submitted with the OMT codes should not be recoded to 97260 and 97261.

2. The work RVUs assigned to the OMT codes are consistent with the definitions above. For example, OMT on the cervical, thoracic, and lumbar regions would be reported with code 98926 since three different regions were treated.

3. Some physicians seem to believe the RVUs assigned to the OMT codes represent only the work of OMT and that any type of evaluation and management (E/M) service on the same date should be separately reported and paid. On the other hand, some carriers seem to believe that the OMT codes have been valued to include E/M services and therefore they will not pay a claim for an E/M service on the same date as an OMT service.

Neither point of view is completely correct. The actual instructions provided to physicians who participated in the Harvard Resource Based Relative Value Scale (RBRVS) study and who rated the work of OMT were as follows:

"For these services, the service period includes your work for the OMT from the time you begin the service until you complete it. Please consider only your work performing the OMT service, including any cursory history or palpatory examination. In particular, do not include your work assessing a new problem."

Because the work values include some services that could otherwise be reported with an E/M code, i.e., "any cursory history or palpatory examination," we decided to prohibit payment for E/M services on the same date as OMT *unless* the patient's condition required a significant, separately identifiable E/M service above and beyond the usual E/M services that are integral to the provision of OMT. To implement this policy, we instructed carriers to deny payment for E/M services on the same date as OMT *unless* the E/M code was appended with a -25 modifier.

4. On June 23, 1992 we issued a memorandum to our regional offices on the issue of the -25 modifier. It had come to our attention that some carriers were not paying for E/M codes with a -25 modifier unless they were "unrelated" to the OMT. We indicated in the memo that was not correct and stated: "A documented, separately identifiable *related* service is to be paid for. We would define related as being caused or prompted by the same symptoms or conditions." Thus, carriers should not deny claims for OMT and an E/M service with a -25 modifier simply because they both are reported with the same diagnosis code. This policy applies whether or not it is a first or subsequent encounter with the patient.

5. When OMT and a significant separately identifiable E/M service are performed on the same date, they should be reported as described above. Physicians should not "upcode" the E/M service and omit the code for the OMT service. Neither should they report different diagnoses for the two services if both services are provided for the same diagnosis.

Please convey this information to the carriers in your region.

Charles R. Booth



## Letter to the Editor

Dear Mr. Boucher:

The Texas Medical Foundation (TMF) was pleased to learn that the Texas Osteopathic Medical Association (TOMA) has presented its Distinguished Service Award to John H. Boyd, D.O., of Eden.

Such an award is recognition of Dr. Boyd's outstanding service and contribution to the osteopathic profession in Texas. The long list of his accomplishments and memberships is testimony to his commitment to organized medicine and to the advancement of the osteopathic profession.

We believe your readers would be interested to know that the announcement printed in the July/August 1994 issue of TEXAS DO cited only a few of Dr. Boyd's many accomplishments on behalf of the osteopathic profession. Two others may be of interest. From 1977 to 1979, Dr. Boyd was president of the Texas Institute for Medical Assessment, the professional standards review organization for Texas. In addition, from 1981-1990, Dr. Boyd was a member of the TMF Board of Trustees, representing TOMA and the osteopathic profession in governing Texas' Medicare peer review organization.

TMF has offered its congratulations to Dr. Boyd. Texas osteopathic physicians can be proud of Dr. Boyd's ongoing contributions to the profession.

Sincerely,

Phil Dunne  
Executive Director  
Texas Medical Foundation

### TEXAS OSTEOPATHIC MEDICAL ASSOCIATION **TEXAS DO** Address CORRECTION

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Round Rock, TX 78664-2901

## Government Launches \$25 Million Program for AIDS Treatments

In the wake of an international AIDS conference which basically reported little progress on AIDS drug therapy, a program for alternative treatments is getting off the ground. The National Institutes of Health reports that alternative treatments are being aimed at strengthening the immune system and genetically attacking HIV. "This effort is crucial because currently available anti-HIV drugs only partially and temporarily suppress replication of the virus, and their use is hampered by toxicity and drug resistance," said Dr. Anthony S. Fauci, director of the NIH's National Institute of Allergy and Infectious Diseases.

According to the World Health Organization, over 14 million people worldwide are infected by HIV and it is projected that 121 million people could die of the disease by the year 2020. ■

## ATOMA News

By B.J. Czewski, ATOMA Immediate Past President

### Surprise! Surprise!

Not only did our own Chairman of the Board of Osteopathic Health System of Texas, Jay Sandelin, make another generous contribution of a trip for our raffle during TOMA's recent convention in June, he also won it! Congratulations, Jay, we are very happy for you in reaping some of your many years of contributing to our Auxiliary. We hope you and Lilla have a wonderful time. But Jay, please remember to wear a hat in that hot Jamaican sun!

Total sales of raffle tickets, cook books, golf shirts and T-shirts reached over \$10,000 after expenses. Good work, Auxiliary!

A special "thank you" goes to Alex Czewski. Without you working those long hours at our membership table while we were in meetings, we couldn't have had such a successful convention. Thank you, Alex! ■

## Employer-Insured Employees Dwindling

Figures from the U.S. Department of Labor indicate that in 1979, 66 percent of employees were covered by health insurance at work; in 1993, that figure had dropped to 61 percent. ■



# CDC Develops Emerging Infectious Disease Plan

The Centers for Disease Control and Prevention has recently developed a booklet entitled, *Addressing Emerging Infectious Disease Threats: A Prevention Strategy for the United States*, which addresses the urgent need to improve the nation's ability to identify infectious disease threats and respond to them effectively. Developed in partnership with local and state public health officials, other federal agencies, medical and public health professional associations, infectious disease experts, and international and public service organizations, the plan will serve as a guide for CDC's work in collaboration with its partners in safeguarding the nation from the threat of emerging infectious diseases.

The plan consists of four primary goals: 1) surveillance; 2) applied research; 3) prevention and control; and 4) strengthened infrastructure among local, state and federal public health providers.

For a copy of the plan, write CDC, National Center for Infectious Diseases, Office of Planning and Health Communication – EP, MS C-14, 1600 Clifton Road, Atlanta, GA 30333. ■

## District News

By Bessanne Anderson, Secretary – ATOMA District V

TOMA District V is sponsoring a "WILD, WILD WEST CASINO NIGHT" at the Loews Anatole Hotel, Dallas, on Saturday, October 8, from 6:30 p.m. to 12 midnight.

Monies raised will be used to support TOMA and ATOMA District V Scholarship funds, NOM Week and local scholarship charities. It will also be used to promote osteopathic medicine in the District V area.

The night will be a full one – dinner, dancing, an auction and the casino. The price for this special event is \$100 per couple or \$125 per couple at-the-door.

If anyone is interested in supporting this worthy event, please call Peggy Rodgers, Funds Chairman, at metro 817-429-4140, or Dr. Randy Rodgers at 214-827-6880.

Hope to see ya'll there. ■

## TOMA MasterCard Program

Issued by MBNA America®, the Texas Osteopathic Medical Association MasterCard® card has no annual fee! TOMA's name and logo is inscribed on each card so every time you show yours, you'll enjoy recognition for your membership in the Texas Osteopathic Medical Association. To apply or to receive more information about the card, contact MBNA at 800-847-7378, and specify priority code MZNN. Mention that you are a TOMA member.

\*MasterCard is a federally registered service mark of MasterCard International, Inc., used pursuant to license. MBNA America and MBNA are federally registered service marks of MBNA America Bank, N.A. ■

## New Address for AOBS

Please be advised that the American Osteopathic Board of Surgery (AOBS) has relocated. The new address and phone numbers are as follows:

**American Osteopathic Board of Surgery**

**3 MacKoil Avenue**

**Dayton, OH 45403**

**(513) 252-0868**

**Fax: (513) 252-0968**

**Toll-free number unchanged: 800-782-5355**

## Veggies May Lower Risk of Ovarian Cancer

A report in the *Journal of the National Cancer Institute* notes that women who consume 10 grams of saturated fat daily may raise their risk of ovarian cancer by 20%. However, the study added that two small servings of vegetables a day could more than offset that risk.

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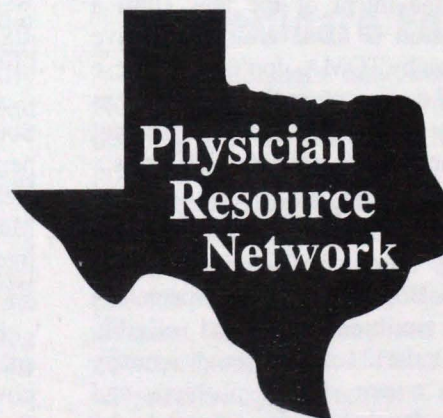
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# Texas ACOFP UPDATE

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

Mark your calendars! October 26, 1994 has been designated as "Osteopathic Medicine Early Voting Day" in Texas. This is a team effort. We need to get our employees to the polls. Health care issues are too important to be left up to chance. We can speak to the issues by way of the ballot box. We are determined that osteopathic medicine is not to be ignored or left out of the health care debates in Austin, Texas. Let's make a sincere effort to get 100 percent of our people registered and to the polls to vote prior to November 1994.

TOMA will function as a clearinghouse to answer your questions regarding candidates for state and/or federal offices. If TOMA can't answer your questions, it will direct you to other resource agencies.

If you have not done so yet, please consider a contribution to the TOMA Political Action Committee (TOMA-PAC). It is an investment in your future. As the TOMA Discrimination Bill moves through the Texas Legislature, we will need friends.

Last month, two certification forms were sent to all Texas Medicaid providers by National Heritage Insurance Company (NHIC). Initially, the information received from NHIC was that the two forms had to be filled out, signed and dated. It was a federal requirement. The Texas Department of Health and the Health Care Financing Administration are currently having their legal counsel evaluate the intent of the law. Until a determination is made and you receive notification by TOMA, don't fill out these forms and do not return them to NHIC as previously instructed. TOMA does not believe these forms apply to physicians.

You are probably aware of the January 1, 1994 deadline imposed by OBRA '90 regarding board certification by the American Board of Medical Specialties in order to treat Medicaid eligible children under 21 and pregnant women. HCFA is aware of the problem and expects to develop an amendment to the proposed regulation that would extend the HHS Secretarial blanket certification period for *all* licensed physicians to December 31, 1996. This change will enable Medicaid eligible children and pregnant women to have access to *any* licensed physician who is able to meet

state standards for participation in Medicaid during the interim prior to final regulations. In addition, HCFA expects that the amendment to the proposed regulation will solicit comments on a proposal to extend on a permanent basis the certification of licensed physicians who are able to meet state standards for Medicaid participation.

Currently, eight states have enacted any willing provider laws, which are designed to make it more difficult for insurance companies and HMOs to exclude doctors from health care networks. Similar legislation is being considered in Texas. Five states have defeated any willing provider legislation. It is a battle of economics versus patient care. The battle is only half won when a physician is accepted by an HMO. Staying in HMOs is getting increasingly more difficult! Physicians can be excluded simply on the basis of economics. When you cost the HMO more than your peers, out you go.

At this time, it looks like any willing provider legislation will be put on a "back burner" in the upcoming Texas legislative session in January 1995. TOMA will probably support legislation which is similar to the Patient Protection Act currently pending in the U.S. Congress. The real legislative battleground will be the enforcement of the Texas law that prohibits the corporate practice of medicine. This law is on the books, but it seems officials are looking the other way. We have to turn up the heat and get Texas officials to enforce the law.

As a young boy growing up in the South, my friends and family used to periodically remind me that "the streets of Hell are paved with good intentions." Many of our legislators have good intentions, but some of them wind up shooting themselves in the foot.

For every \$1.00 Texas lawmakers spend on Medicaid services, the federal government spends approximately \$1.79. For every \$1.00 we save by reducing state spending, we forfeit almost \$2.00 in federal funding. When Texas lawmakers mandate more managed care, the anticipated cost savings will result in less state dollars to pull in federal funds. Texas House and Senate committees are currently trying to reform the Medicaid

program. Let's hope that the baby doesn't get thrown out with the bath water.

Medicaid in Texas is currently operated like an open panel HMO; when people start talking about more managed care, what they really are saying is that we need closed panel HMOs. Needless to say, a closed panel HMO set-up restricts choice. That is going to be a tough sale in the Texas legislature! Texans cherish freedom of choice in all things.

You have probably been sent information regarding the Texas Independent Osteopathic Physicians Association (TIOPA). TOMA and the Texas Society of the ACOFP strongly support TIOPA. By joining together with other osteopathic physicians across the state, you will receive the benefits of joint marketing and promotion, and managed care review and analysis.

I can personally tell you that Medicaid is moving rapidly towards managed care. Who will negotiate for individual D.O.s across the state? The answer is TIOPA if you are a member. There is strength in numbers – join TIOPA and negotiate from a position of strength. If you need more information regarding TIOPA, contact Mike Ranelle at (817) 377-8046 or 1-800-725-6628.

Listed below are the 13 standing committees of the Texas Society of the ACOFP, including the membership:

**\*\*Education/Program/Convention Committee:** Carol Browne, D.O., Chairman; Jack McCarty, D.O., Assistant Chairman; Sara Apsley-Ambriz, D.O.; Craig Whiting, D.O.; Rodney Wiseman, D.O.; and Howard Galarneau, D.O. **\*\*Membership Committee:** Howard Galarneau, D.O., Chairman; Craig Whiting, D.O., Assistant Chairman; Patrick Hanford, D.O.; and R. Greg Maul, D.O. **\*\*Pharmaceutical/Grants Committee:** Steve Rowley, D.O., Chairman; John Bowling, D.O., Assistant Chairman; Carol Browne, D.O.; and Sharron O'Day, D.O. **\*\*Awards Committee:** Rodney Wiseman, D.O., Chairman; Jack McCarty, D.O., Assistant Chairman; Sara Apsley-Ambriz, D.O.; and Nelda Cuniff, D.O. **\*\*Auditing Committee:** Ben Young, D.O.; Mike Franz, D.O.; Steve Rowley, D.O.; and Rodney Wiseman, D.O. **\*\*Constitution and Bylaws Committee:** T. Eugene Zachary,



# October 26 Is Osteopathic Medicine Early Voting Day In Texas

It is anticipated that medical care in the future will be shaped by politicians, eventually falling under the auspices of the federal government – which is not in the best interest of the patient, or the physician, we might add. The possibility exists that organized medicine could be left with no voice whatsoever in the final outcome.

Early voting is now the law in Texas, which means an end to standing in long lines on election day. Along with other inconveniences, it is common knowledge that voter apathy is epidemic in Texas. Additionally, there is still an unfortunate reluctance on the part of many physicians to become politically involved at any level.

With these thoughts in mind, the House of Delegates of the Texas Osteopathic Medical Association approved Resolution No. 94-03 (TOMA Supports Early Voting Day Policy), at its meeting in June.

The House noted that Texas osteopathic physicians do not believe that a minority of the total electorate should be making government policies concerning issues such as health care and education; and that if every health care provider and health care facility in Texas would initiate a policy to allow their employees time off during working hours to participate in early voting, the political clout of organized medicine would be substantially enhanced in Austin, Texas and Washington, D.C.

The House encouraged all Texas osteopathic physicians, medical and health care organizations in Texas to adopt early voting policies in their work places that would allow employees time off during working hours to participate in early voting for local, state and national elections.

TOMA has chosen October 26 as Early Voting Day in Texas and urges all osteopathic physicians and facilities to join us in our efforts to support this important concept. By allowing employees time off during working hours, there will be fewer excuses for not voting. If every osteopathic

physician and health care facility in Texas would adopt this concept, our political clout in Austin would be staggering.

To carry it even further, our political impact would be felt in Washington, D.C., if all other states carried out this policy. As you may be aware, the House of Delegates of the American Osteopathic Association, during its meeting in July, approved Resolution No. 276 – AOA Supports Early Voting Day Policy.

The fact is that we can shape health care policies at both the state and national levels if we just make the effort to do so through teamwork. It's time for us to take the medical reins from the hands of politicians.

We encourage all Texas D.O.s and facilities to join us in promoting October 26 as Early Voting Day. This simple yet effective policy has the potential to create an impact that can and will make a beneficial difference. Your participation is vital!

## Graftek Offers Texas Osteopathic Medical Association Discount On Medicare Forms

TOMA members may now obtain HCFA 1500 forms at a 10 percent discount off the published list prices provided you are carried on our roster as a member in good standing, and identify yourself as a TOMA member when ordering. Graftek will also provide an additional five percent discount on all personalized or blank non-continuous forms. Discounts will be extended on ALL reorders as long as you remain a member. Graftek has marketed 1500 forms for years and maintains on a regular basis the most competitive prices in the nation. Their toll free number is 800-848-2992 (9 a.m. to 6 p.m.), Monday through Friday. No deposit required. Satisfaction guaranteed.

D.O., Chairman; and Lance Hafter, D.O.  
\*\*Nominating Committee: Ben Young, D.O.; Mike Franz, D.O.; and Steve Rowley, D.O.  
\*\*Governmental Legislation & Liaison Committee: Joe Montgomery-Davis, D.O., Chairman; Mike Franz, D.O.; and Rodney Wiseman, D.O.  
\*\*Public Information Committee: Royce Keilers, D.O., Chairman; Patrick Hanford, D.O.; and Elizabeth Palmarozzi, D.O.  
\*\*PACERS Committee: Mike Franz, D.O., Chairman.  
\*\*Undergraduate FP Chapter Liaison Committee: Carol Browne, D.O., Chairman; and Student Doctor Mike Bratch.  
\*\*General and Family Practice Resident Liaison Committee: Craig Whiting, D.O., Chairman.  
\*\*Hospital Committee: no appointments.

Listed below are the delegates and alternates to the 1995 Congress of Delegates of the ACOFP:

### Delegates

Mike Franz, D.O.  
Rodney Wiseman, D.O.  
Howard Galarneau, D.O.  
Steve Rowley, D.O.  
Jack McCarty, D.O.  
Ben Young, D.O.  
Carol Browne, D.O.  
Sara Apsley-Ambriz, D.O.  
John Bowling, D.O.  
Royce Keilers, D.O.  
R. Greg Maul, D.O.  
Robert Maul, D.O.  
Steve Urban, D.O.  
Richard Hall, D.O.  
Sam T. Coleridge, D.O.  
Robert L. Peters, Jr., D.O.  
Hector Lopez, D.O.  
Robert Finch, D.O.  
Patrick Hanford, D.O.  
Lance Hafter, D.O.  
Sharron O'Day, D.O.  
Cindy Shughrue, D.O.  
Elizabeth Palmarozzi, D.O.  
Craig Whiting, D.O.  
T. Eugene Zachary, D.O.  
Donald Peterson, D.O.  
T. R. Sharp, D.O.

### Alternates

Daniel Saylak, D.O.  
Charles Hall, D.O.  
Robert Stark, D.O.  
Bernard Feigelman, D.O.  
Victorija Laucius, D.O.  
Jeannie Chadwell, D.O.



# OMCT Opens New Space for Cardiac Rehab Program

Osteopathic Medical Center of Texas' Cardiac Rehabilitation department held an open house May 12 for physicians to preview the new Cardiac Rehab facilities in the V.L. Jennings Outpatient Pavilion.

The event featured tours of the new exercise facility, nutritional center and offices. It also featured a special Continuing Medical Education seminar on Cardiac Rehabilitation "A Standard of Care" presented by James Reznick, D.O., F.A.C.C., medical director of OMCT's Cardiac Rehabilitation, and Neil Gordon, M.D., medical director of Presbyterian Hospital and a member of the Dallas Heart Group.

Doctors viewed firsthand the equipment and services that OMCT provides in Cardiac Rehabilitation's "Life Beat" program.

"The Life Beat program is designed for people recovering from a heart attack, heart surgery or cardiovascular disease or anyone who is at high risk of developing heart problems," Denise Gatson, RN, director of Cardiac Rehab said. "We guide the patients through every step of the recovery process and by doing so, we become very attached to our patients — they are like family to us."

The Life Beat Program is divided into three phases: Phase I includes a nutrition assessment; a physician's prescribed therapy program, which may include range-of-motion activities such as walking, sitting and standing; and educational classes with nurses, physicians, dietitians and social workers.

"This phase helps patients understand what has happened, what is going to happen and helps them with lifestyle changes that accompany a cardiac event," Denise said.

Phase II includes instruction on the various lifestyle changes that patients should incorporate in their diet, methods of weight control, medication, and exercise regimens. Patients are prescribed an active exercise schedule at Cardiac Rehab's exercise facility. Nurses closely monitor a patient's heart and blood pressure throughout their workout. Phase II participants meet three times a week for 12 weeks and

progress reports are sent to their physicians at the sixth and 12th week.

During Phase II an individualized nutritional assessment is done with a dietitian. Nutritional classes are held that include fat and cholesterol information, low-fat cooking classes and a grocery store shopping tour.

Phase III is where "prevention really works wonders" as patients have the chance to continue the good nutritional habits and exercises that they learned in the program on a continual basis through the use of: circuit training, individualized exercise programs,

blood pressure monitoring, home exercise programs, cross training, support groups and goal setting. The exercise programs of patients in Phase III are supervised but not monitored to enhance their commitment to good health and exercise.

Phase III also is available for other special patient populations such as diabetes, stroke, obesity, cancer, arthritis and others.

If you're interested in learning more about OMCT's Cardiac Rehab program, call Denise Gatson, RN, at (817) 735-6404. ■

## Now You Can Call COLA Toll-Free 1 (800) 298-8044

Physicians interested in private-accreditation through COLA can now call toll-free at 1 (800) 298-8044 to enroll in COLA's Laboratory Accreditation Program or to obtain more information about COLA. COLA is approved by the Health Care Financing Administration (HCFA) as your peer-review alternative to CLIA 88. Among other educational benefits, COLA-accredited laboratories are not inspected by government surveyors and they have available free consultation with COLA experts.

The toll-free number connects directly to the COLA customer service center, professionally-staffed to provide physicians with prompt answers in a clear and straight forward manner. The Customer Service Center is widely used by COLA participants for technical assistance in office laboratory testing. The release of the toll-free number should provide some relief to COLA participants as well as physicians interested in finding out more about the COLA Program. And, the introduction of the number is timely as the federal government's CLIA Hotline deactivated September 30.

Many office laboratories have already or will soon enter the second biennial inspection cycle (Cycle Two) of the CLIA Program. HCFA is in the process of billing laboratories, who have received their first government survey,

in the amount of \$100, \$350 or \$600 for their official certificates. For those laboratories participating in the government inspection program (not COLA), HCFA is *simultaneously* billing them for the cost of the government inspection for CLIA Cycle Two.

Those physicians who participated in the government CLIA inspection program for Cycle One may enroll in COLA for the second biennial inspection cycle. If you choose to enroll in COLA for Cycle Two you should *NOT* pay the Cycle Two inspection fee on the itemized bill. Physicians should only enclose the amount for the official certificate and any past due amounts (e.g. HCFA inspection for Cycle One). Attach a note of explanation that you are *NOT* including the Cycle Two compliance fee because you are enrolling in COLA for Cycle Two. For more information about the HCFA fees and the COLA alternative, call COLA at 1 (800) 298-8044.

The Commission on Office Laboratory Accreditation is sponsored by the American Medical Association, American Society of Internal Medicine, the American Academy of Family Physicians and the College of American Pathologists and formally endorsed by the American Osteopathic Association and over seventeen state and national medical and specialty society organizations. ■



## MEDICAID CERTIFICATION

Last month's issue warned you that OBRA 90 dictated, effective 1/1/95, that physicians who treat Medicaid patients under 21 or pregnant must be certified in F.P., OB, or Pediatrics. We received word from Terry Boucher, Executive Director of T.O.M.A. (Texas Osteopathic Medical Association) that we were not complete in our statement, so we now correct it. You will be considered "certified" if you meet any of following:

- In the case of services to children, is certified in family practice or pediatrics by the medical specialty board recognized by the American Board of Medical Specialties for family practice or pediatrics, or in the case of services to pregnant women, is certified in family practice or obstetrics by the medical specialty board recognized by the American Board of Medical Specialties for family practice or obstetrics.
- Is employed by, or affiliated with, a Federally qualified health center as defined in the Federal Medicaid statute.
- Holds admitting privileges at a hospital participating in a State plan approved under the Fed. Medicaid statute.
- Is a member of the Nat. Health Services Corps.
- In the case of services to children, documents a current, formal, consultation and referral arrangement with a pediatrician or family practitioner who has the certification described above, for purposes of specialized treatment and admission to a hospital, or in the case of services to pregnant women, documents a current, formal, consultation and referral arrangement with an obstetrician or F.P. who has such a certification, or
- With regard to services provided to children under age 21, has been certified by the Secretary (HHS) as qualified to provide physician's services to children under 21 years of age, or with regard to services provided to pregnant women, has been certified by the Secretary as qualified to provide physician's services to pregnant women.

Even though the TX Academy of F.P. reports only 34% of F.P. in Texas are certified, it is our understanding that the vast majority of physicians meet the above requirements. If you do not believe that you are, you may want to write to the Health and Human Services Secretary, Donna Shalala, at the following address and request a letter from her approving your certification. We understand that she does grant this by a simple request in writing.

**Donna Shalala, Ph.D.**  
**Secretary of Health and Human Services**  
**200 Independence Ave. S.W.**  
**Washington, DC 20201**

We will keep you updated on this certification question, as we receive information.

## MEDICAID SENDING LOBBYING FORMS

We've received numerous calls and several faxes concerning the "Lobbying Disclosure" forms from NHIC (Medicaid) in Texas. These forms require you to disclose information that we believe the government has NO BUSINESS knowing, and, in our opinion, represses the freedoms that you are guaranteed in the constitution. Again, TOMA Executive Director Terry Boucher has been meeting with Health and Human Services and is now recommending that you DO NOT SIGN OR MAIL IN THE FORMS. Evidently, these forms were not to be mailed to the physicians but were supposed to be sent to other medical providers (pharmacists, DME rental, etc.).

## CARRIERS ACCEPT ELECT. CLAIMS

In addition to Medicare, Medicaid, and Blue Cross, we are now transmitting claims received from hospitals and other providers

with computers electronically to the following carriers:

AARP	Administar	Aetna Health
Aetna Life	Allmerica	All Savers Ins.
Alta Health	APWUH	Atlantic
Bell Atlantic	Central States	Benefit Trust
CIGNA	CIGNA Health	CIGNA PPO
CNA Mail	Community	Confed Admin.
ConnectiCare	Diversified	EBA
Employers Heal	Exclusicare	Equicor
Equicor PPO	ETHIX Midwest	Genelco
Gen Amer. Life	GenCare Health	Georgia Power
Golden Rule	Gov't Employees	Great Southern
Great-West Life	G.I.A.	The Guardian
Harris Methodist	Hartford Life	Health Alliance
Health Econ.	Health Plan Adm	HealthChoice
Healthpoint	Healthy Choice	Heritage Nat'l
HMPK Inc.	Humana	ICH Corp.
ITT Comp.	ITT Hartford	J.F. Malloy
John Hancock	Kentucky Kare	Life Ins. Co Georgia
Marriott	Mass. Mutual	Met Elect.
MetLife Health	Metropolitan	Michael Reese HMO
Modern Amer.	Mutually Pref.	Mutual Alliance
Mutual - Omaha	NationWide Mut.	Nat.Association Letter Carrier
New England	New York Life	Nippon Life Ins. Co.
Physicians Corp	Philadelph. Amer.	PMG
PM Group	Prime Benefits	PrimeCare
Prime Health	Principal Fin.	Principal Mutual
Provident Life	PruCare	Prudential
PruNetWork	Rockwell Int'l	Rooney Life
Sanus HMO	Sanus PPO	SelectCare
Sooner Health	S.W. Bell	State Mutual Life
Sun Trust Bank	3rd Party Claims	The Travelers
Travelers Health	United of Omaha	Wausau

If you are not yet filing your claims electronically, you may want to start. There are advantages!

## BUMPER STICKERS WE LIKE (From Armbruster Clinic - Pearland)

**"IF YOU THINK HEALTHCARE IS EXPENSIVE  
 NOW, WAIT UNTIL IT'S FREE."**

## ICD9 CODES TO AVOID

There are certain ICD9 codes you want to avoid, to keep from having your claims rejected or delayed. Non-specific diagnosis are not only being denied by Medicare, but some private carriers are doing this also. For instance, SANUS Health Plan rejects claims submitted with the following non-specific diagnosis codes:

1129	Candidiasis Of Unspecified site
2349	Carcinoma Site Unspecified
5119	Unspecified pleural effusion
7069	Unspec. disease of sebaceous glands
71590	Unspec. osteoarthritis site unspecified
79430	Abnormal Cardio. function study unspec
8799	Open wound(s) of unspecified site(s)

As more and more carriers adopt the specificity coding system, you will find less and less opportunities to use these non-specific codes. We recommend that you review any codes that you use often that have the last digit as "9" to make sure it is not classified as non-specific. If you are using a color coded ICD9 book (such as the PMIC edition), this job will be a little easier. While not all non-specific codes end in "9" and not all codes ending in "9" are non-specific, the search for the "9s" will make it simpler. ■



# New Members

*TOMA would like to welcome the following new members who were approved at the June 14th Board of Trustees Meeting*

**James E. Baum, D.O., FAADEP**, and his wife Isha Dawn reside in El Paso. Dr. Baum graduated from the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, in 1968. He completed his internship at Hillcrest Hospital in Oklahoma City, Oklahoma. He has also completed several preceptorships in general surgery and orthopaedics as well as anesthesia and pain management. He holds many American Osteopathic Association Board Certifications and is a fellow of the American Academy of Disability Evaluating Physicians and American Academy of Neurological and Orthopaedic Surgeons. In addition, he maintains membership in several Colleges and Academies and has held numerous teaching appointments. He has three children, Todd, Russell and Joshua.

**James E. Cary, D.O.** is a practicing physician in Spring, Texas, which is located in Montgomery County, north of Houston. Dr. Cary graduated from Kirksville College of Osteopathic Medicine, located in Kirksville, Missouri, in 1951. He served an internship at the Detroit Osteopathic Hospital from 1951 to 1952. He completed a preceptorship in anesthesiology at Doctors Hospital in Houston, Texas. Dr. Cary is certified by the American Osteopathic Board of General Practice. He and his wife Linda have three children, Randall, Susan and Bart.

**Rann Lionel Clark, D.O.** practices in Austin and in neighboring Buda, Texas. He graduated from the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, in 1971. He served his internship at the USAF Medical Center, Wright Patterson AFB in Dayton, Ohio from 1971 to 1972. Dr. Clark has previously practiced in Fort Worth. He was a student member of TOMA from 1968 to 1971, and a regular member until 1993. We welcome him back to the Association. He and his wife Jeanie have two children, Deborah K. Clark Gonzales and Richard L. Clark.

**John Richard Coe, Jr., D.O.** has rejoined TOMA and we are pleased to have him. He graduated from the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, in 1966. He served his internship at the Osteopathic Hospital in Kansas City from 1966-1967. Since graduation he has practiced in Vietnam

from 1967 to 1968 and worked in Desert Shield in 1990. Dr. Coe is a Diplomate and Fellow of the American Academy of Family Physicians and Diplomate and Fellow of the American Academy of Utilization Review Physicians. Currently he practices in El Paso, Texas. He and his wife Maxine have two children, John Richard III and Kiersten Elizabeth.

**Scott A. Compton, D.O.** is a practicing physician in Groves, Texas. He graduated from the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, in 1986. He completed his internship at Metropolitan General Hospital in Pinellas Park, Florida in 1987. At the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, he served his residency in Orthopedic Surgery from 1988 to 1992. Afterwards, he practiced in Florida until September of 1993. He and his wife Debra have two children, Lauren and Benjamin.

**Merritt Gambrell Davis, Jr., D.O.** has joined TOMA as a military member. Dr. Davis graduated from the Philadelphia College of Osteopathic Medicine in Philadelphia, Pennsylvania, in 1962. He served his internship at Riverside Hospital in Wilmington, Delaware from 1962 to 1963. From 1963 to 1970, he completed residency programs and is certified in Obstetrics and Gynecology and Preventive Medicine. He served a fellowship in Hyperbaric Medicine at Riverside Hospital, Delaware Valley Hospital, Bristol, Pennsylvania, and J. F. Kennedy Memorial Hospital, Stratford, New Jersey, respectively. He is a member of the American College of Osteopathic Obstetricians and Gynecologists and the American College of Preventive Medicine. He and his wife Teresa live in San Antonio and have three children, Kimberley, 34, Pamela, 28, and Merrit III, who is 25.

**David E. Garza, D.O.** graduated from the University of North Texas Health Science Center, Texas College of Osteopathic Medicine, in Fort Worth in 1989. After graduation he did his internship at the Osteopathic Medical Center of Texas from 1989 to 1990. He served his residency in Family Practice at Memorial Medical Center in Corpus Christi, Texas from 1990 to 1993. He and his wife Linda live in Laredo,

where he has his practice.

**Dean Allan Grace, D.O.** has joined TOMA as an out-of-state military member. He is a 1991 graduate of Michigan State University, College of Osteopathic Medicine, in East Lansing, Michigan. He served his internship at Pensacola Naval Hospital in Pensacola, Florida, from 1991 to 1992. He currently is in the US Naval Flight Surgery Training, at Naval Aerospace Medical Institute in Pensacola, Florida.

**Roger Allen Guthrie, D.O.** is a 1976 graduate of the Chicago College of Osteopathic Medicine, in Chicago, Illinois. He completed his internship and residency in Obstetrics and Gynecology at Grand Rapids Hospital in Grand Rapids, Michigan, from 1976 to 1977 and from 1977 to 1981 respectively. He is a fellow of the American College of Osteopathic Obstetricians and Gynecologists. He and his wife live in Colleyville, Texas and have five children, Ryan, 18, Robyn, 17, and Rachel, 10, Roman, and Rory 5. We welcome him as he rejoins TOMA.

**Marcom E. Herron, D.O.** is a practicing physician in Wichita Falls, Texas. A 1989 graduate of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth, he served his internship at McLennan County Medical Education and Research Foundation in Waco, Texas from 1989 to 1990 and residency in Physical Medicine and Rehabilitation from 1990 to 1993. He and his wife April have one child, Jennifer.

**Commie Lawrence Hisey, D.O.** has a family practice in Cost, Texas, just east of San Antonio. Dr. Hisey graduated from the University of North Texas Health Science Center, Texas College of Osteopathic Medicine, in Fort Worth, in 1990. He served his internship and residency in family practice at John Peter Smith Hospital in Fort Worth, from 1990 to 1993. He and his wife Donna have two children, Benjamin and Matthew.

**Abdul Itani, D.O.** is a 1989 graduate of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth. He completed his internship at the Dallas/Fort Worth Medical Center in Grand Prairie, Texas from 1989 to 1990. Dr. Itani served his residency in Anesthesia at the Baylor College of



Medicine in Houston, Texas, from 1990 to 1993. He is in his first year of practice in Fort Worth

**David B. Kaner, D.O.** graduated from the University of Osteopathic Medicine and Health Sciences, in Des Moines, Iowa, in 1987. After graduation he served his internship at Detroit Osteopathic/Bi-County Hospital in Detroit, Michigan, from 1987 to 1988. He completed his residency in Internal Medicine at the same hospital from 1988 to 1991. He is a member of the American College of Osteopathic Internists and certified by them since 1991. He practices in Arlington, Texas.

**Richard L. Kaura, Jr., D.O.** is an Anesthesiologist in Fort Worth, Texas. He is a 1989 graduate of University of North Texas Health Science Center, Texas College of Osteopathic Medicine, in Fort Worth. Dr. Kaura completed his internship in 1990 at the Dallas Family Hospital and rotated his residency in Anesthesiology in several locations. He currently practices at the Osteopathic Medical Center of Texas in Fort Worth, Texas.

**John S. MacKenzie, D.O.** is a 1989 graduate of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth. Since graduation he has interned at Doctors Hospital in Columbus, Ohio, from 1989 to 1990 and completed his residency in Internal Medicine at the Texas College of Osteopathic Medicine from 1990 to 1993. His practice is in Fort Worth where he and his wife live with their two children.

**Linda R. Martin-Ernst, D.O.** practices in Plano, Texas. She graduated from the University of Health Sciences, College of Osteopathic Medicine in Kansas City, Missouri in 1970. She completed her internship at Mesa General Hospital in Mesa, Arizona, in 1971. We welcome her as a new member of TOMA.

**Elizabeth A. McKinnis, D.O.** is a 1990 graduate of the Oklahoma State University, College of Osteopathic Medicine, in Tulsa, Oklahoma. She continued with an internship at Tri-City Hospital in Dallas, Texas, from 1990 to 1991. Dr. McKinnis completed her residency in General Family Practice at Tri-City Hospital in Dallas, from 1991 to 1993. She and her husband Mark live in Mesquite, Texas.

**Lewis Mendell, D.O.** is in Family Practice in Portland, Texas, just north of Corpus Christi. He graduated in 1967 from the Kirksville College of Osteopathic Medicine, in Kirksville, Missouri. Dr. Mendell completed his

internship at the Corpus Christi Osteopathic Hospital in Corpus Christi, Texas from 1967 to 1968. We welcome him as a new member of TOMA.

**Christopher P. Penning, D.O.** graduated from the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri, in 1992. He completed his internship at Doctors Hospital in Groves, Texas, in 1993. Dr. Penning currently practices in Groves and is on the hospital staff at Doctors Hospital.

**Gil Bruce Scarnati, D.O.** is an active osteopathic physician. He is a member of the Oklahoma Osteopathic Association, the American College of Family Physicians, and the Board of Physician Peer Review/Grievances. Dr. Scarnati graduated from the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth, Texas, in 1990. He completed his internship at Dallas Memorial Hospital, in Dallas, Texas, from 1990 to 1991. He practices in Dallas.

**Gregory H. Smith, D.O.** has finished serving time in the Navy at Portsmouth Naval Hospital in Portsmouth, Virginia. He graduated from Kirksville College of Osteopathic Medicine, in Kirksville, Missouri in 1984. He completed his internship at Doctors Hospital in Columbus, Ohio, from 1984 to 1985, a General Surgery residency at Doctors Hospital from 1985 to 1986, and a Neurosurgery residency at Doctors Hospital from 1986 to 1990. He is a member of the American College of Osteopathic Surgeons and has been certified since 1992. He and his wife Sherry live in Fort Worth with their two children, Brian and Heath.

**Daniel Philip Sneed, D.O.** graduated from the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth, Texas in 1986. He served his internship at the Dallas/Fort Worth Medical Center in Grand Prairie, Texas from 1986 to 1987. Dr. Sneed practices in Fort Worth where he lives with his wife Lynn and their seven children, Joey, Rebekah, Michael, John, Elizabeth, Philip, and David.

**John Barton Spain, D.O.** is a 1979 graduate of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine in Fort Worth. He served his internship at Doctors Hospital in Columbus, Ohio, from 1979 to 1980. Dr. Spain practices in Fort Worth where he lives with his children, Brian, Michael and Andrew.

**James R. Spradlin, D.O.** practices in Houston where he lives with his wife Deborah. He is a 1989 graduate of the University of North Texas Health Science Center, Texas College of Osteopathic Medicine. He continued his training with an internship at Doctors Hospital in Houston, Texas, from 1989 to 1990. He completed his residency in Family Practice at Doctors Hospital in Houston, from 1990 to 1992.

**Col. William V.S. Thornton, D.O., M.P.H.** is a Primary Care/Family Practice physician at the USAF Base, Wilford Hall Medical Center in San Antonio, Texas. He is a 1970 graduate of the University of Health Sciences, College of Osteopathic Medicine, in Kansas City, Missouri. Dr. Thornton completed his internship at the USAF Medical Center in Biloxi, Mississippi, from 1970 to 1971. He served his residency in Aerospace/Preventive/Occupational Medicine in the Air Force. He also has a Masters in Public Health from Tulane University in New Orleans, Louisiana. He is an active member in many osteopathic organizational activities. He and his wife Maria have three children, Cyndi, Sandra, and Lee Ann.

**Lon Andrew Walder, D.O.** is currently on faculty at the Texas College of Osteopathic Medicine, in Fort Worth. He is a 1986 graduate of the Oklahoma State University, College of Osteopathic Medicine, in Tulsa, Oklahoma. He served his internship at the Osteopathic Hospital of Maine, in Portland, Maine, from 1986 to 1987. Dr. Walder completed his residency in Internal Medicine at St. Vincent Hospital, in Worcester, Massachusetts, from 1987 to 1990 and a fellowship in Cardiovascular Diseases at St. Vincent Hospital from 1990 to 1993. He has been board certified since 1990 by the American Board of Internal Medicine. He and his wife Pamela have three children, Jeffrey, Jeremy, and Jared. The Walders reside in Arlington.

The following members have been granted Retired Membership status by the House of Delegates at the June 1994 meeting:

Jimmy D. Bell, D.O. ....TOMA District X  
Julian E. Berry, D.O. ....TOMA District III  
Shelly Brooks, D.O. ....TOMA District XVIII  
Frank B. Falbey, D.O. ....TOMA District XV  
Randolph R. Gillum, D.O. ....TOMA District V  
Elva Keilers, D.O. ....TOMA District IX



# Public Health Notes

## *Quality Assurance: A Valuable Tool*

*Alecia A. Hathaway, M.D., M.P.H.*

Years ago it became apparent under the Medicare system that some mechanism to monitor and control the cost of the program was necessary. In 1972, the Bennett Amendment to the Social Security Act (Public Law 92-603) established the Professional Standards Review Organizations (PSROs) to assess the quality of medical care that Medicare Title XIX recipients were receiving. It sought to curb cost escalation in these programs by utilization review. Like so many well-intentioned efforts, the PSROs did not accomplish the goal for which they were created; and, they were replaced by Peer Review Organizations (PROs). In 1982, the Tax Equity and Fiscal Responsibility Act (Public Law 97-248) mandated the formation of PROs to accompany the "prospective payment systems" legislation passed in 1983.

This new payment system under Medicare led to quality of care issues which gave rise to the Quality Intervention Program (QIP) of 1989. This program required PROs to take certain corrective actions when quality problems were identified. This formed the backdrop for today's health care Quality Assurance/Continuous Quality Improvement (QA/CQI) practices, but the concept has become standard to all aspects of industry and business. The underlying theme, which has long been adopted by private enterprise, is minimum cost for maximum quality of product. Efficiency has always been the pathway to achieve this, and application of QA/CQI provides an avenue to identify weak practices and inefficiencies which ultimately drive costs up. That notwithstanding, QA for the health care industry employing adequate peer review eventually allows identification of standards of practice and care which uniformly reduce waste (costs) while enhancing quality of care for the patient.

Having said all that, my contention is that whether mandated or not under

some payer system, no business can afford (regardless of source funding) to not employ QA/CQI practices, however small the enterprise may be. I would like to share some scenarios of which I recently learned in order to illustrate how vital QA practices are, not just for cost containment but most importantly for quality patient care.

The diagnosis of HIV infection is a grave and serious one, carrying a multitude of implications. A patient might react over time with a variety of adverse and destructive behaviors, experiencing all the stages of the grief response. Certainly, the diagnosis should be certain before being conferred. The ELISA serology test is extremely sensitive, as it should be, but, consequently yields a small percentage of false positives. Standard laboratory protocols usually require two successive positive ELISAs with one confirmatory Western blot (the gold standard). Occasionally, we have seen a confirmatory test known as the HIV-1 IFA (Immune Fluorescent Antibody). More recently, HIV-2 has been detected in our county, but is more concentrated in the east coastal region. HIV-2 testing must be specifically requested of a laboratory for it is not automatically performed.

Since it has become a requirement of many federal grants, many health departments along with a number of health agencies subject their HIV programs to QA practices. Occasionally patient charts which lack a record of laboratory evidence to support the diagnosis of HIV infection are identified. These programs receive referrals from many community agencies and documentation does not always follow the patient. It is usually the practice to obtain another HIV serology on patients who fall into this category to post in their records.

A health agency reported the case of a young woman, Patient A, who had been briefly followed in their clinic.

She had been referred by an outside agency who, years prior, had found her to be HIV infected per a reported positive serology which evidently had not been available. Fortunately, she remained asymptomatic and CD4 counts were always above 500 cells/mm<sup>3</sup>; she had not begun an antiretroviral therapy or other chemoprophylaxis. To ensure adequate medical chart documentation, another HIV serology was obtained (ultimately on three different samples obtained three different times and submitted to three different laboratories); it was found to be unmistakably negative. Patient A had been incorrectly diagnosed years ago. The implications of this are obvious. Evidently, she had suffered no physical damages in the interim, but the pain and suffering are difficult to determine. Her life had been altered and it was noted that she had lost her spouse as a result.

Patient B is a case who had been seen by many providers. However, the reporting agency noted that record keeping had formerly been a problem for that facility. A new clinician taking over Patient B's care presented the case during a weekly conference (a QA practice). A multitude of problems which did not tie together in any logical pathological process or intelligible timeframe were noted. The patient was being followed for an acute upper respiratory syndrome and blood samples were obtained to monitor the complete blood count. Good QA procedures were now in place and since no HIV serology appeared on the chart, a sample for HIV testing was submitted as well. This patient had a history of extremity wounds which purportedly yielded a common enteric organism on culture, and there was a recent fracture with a non-healing wound which appeared suspect according to the attending clinician. A work-up for osteomyelitis, diabetes mellitus, etc. was negative. The patient's HIV serology was also negative. However,



the CD<sub>4</sub> count had dropped below 500 cells/mm<sup>3</sup> in the past and zidovudine therapy had been started. Bear in mind that the antiretrovirals are all essentially poisons.

The most salient feature to Patient B's vignette is that the patient wanted to be HIV positive. The wounds and other pathology had been self-inflicted for secondary gain. Munchausen's syndrome is difficult to comprehend in any circumstance, but we evidently need to be aware of HIV Munchausen syndrome. Although the previous clinician had suspected Munchausen syndrome in this patient based on the questionable behavior and wounds, the patient's HIV status was not initially an issue. Simple QA practice eliminated any further deliberation.

Next is new Patient C who had many social adjustment and emotional problems. She presented with multiple vague somatic complaints. Her history was significant for multiple exploratory surgeries - all negative. Her picture was most compatible with somatization

disorder. She did present with a copy of a positive HIV test from a reputable laboratory. However, the date of testing was the late 1980's and HIVAGEN confirmation of HIV seropositivity was noted rather than Western blot. Because of other cases of patients being diagnosed as HIV infected with outside laboratory documentation of seropositivity, QA practices have often been heightened to not only ensure that a laboratory record exists, but that one from the providing agency also appears on the chart. Therefore, the clinician in this case submitted a blood sample for HIV testing on patient C to learn that she was seronegative.

QA is extremely important to ensure quality patient care. Apart from utilization review, it can provide the clinician with valuable feedback to revise or enhance clinical approaches. Astute patient care has been shown to be far more effective in containing costs than mediocre care (often involving poor documentation and shotgun approaches to workups). And,

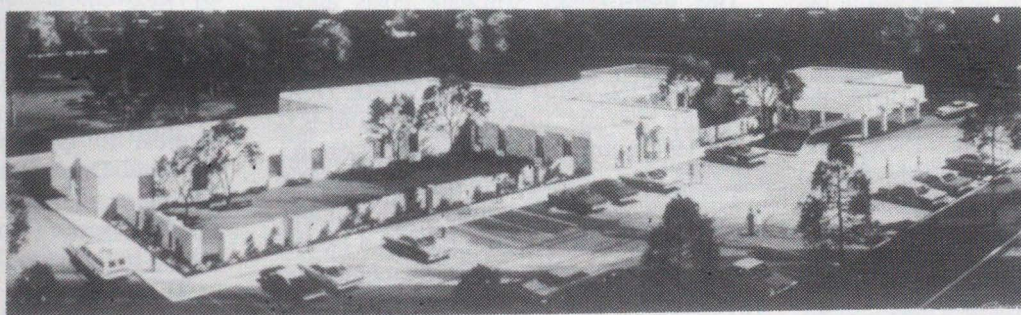
of course preventive care is the most cost-effective.

The scenarios I have outlined above involve predominantly proper chart documentation rather than problematic clinical approaches. But, something as seemingly simple as documentation plays a monumental role in proper patient care as illustrated above.

The second point to these examples is to confirm and, perhaps overconfirm, test results for potentially serious conditions. Certainly, we all wish to avoid undue harm to our patients, as well as obviate unnecessary exposure to liability.

Medical practice has become a very challenging craft on so many levels. I hope that by passing on the above scenarios that we may have succeeded in illustrating to you the value of simple QA/CQI. Moreover, I hope that we might have convinced you to consider embracing it as a useful tool in some form - if you have not already done so. ■

## DOCTORS MEMORIAL HOSPITAL TYLER, TEXAS



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Tyler, Texas 75701

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# News from the University of North Texas Health Science Center At Fort Worth

## **TCOM Student Scholarship Drive Exceeds 1994 Goal**

Contributions from Texas osteopathic physicians and Texas College of Osteopathic Medicine alumni to the UNT Health Science Center/TCOM Foundation's 1994 scholarship drive exceeded expectations, boosting total collections over the goal.

The foundation had hoped to receive \$31,500 by August 31 in response to personal letters and phone calls to alumni and other Texas D.O.s, and health science center staff and faculty. Greg Upp, foundation chairman, reported that as of the end of August, \$32,255 in cash and pledges had been received. Of this amount \$19,255 was from TCOM graduates and their osteopathic colleagues.

"This is an excellent indicator of the commitment of the Texas osteopathic community to the recruitment and success of future D.O.s," Upp said. "It also marks the first time health science center employees have joined with TCOM alumni and other Texas D.O.s to support a major scholarship drive. Together, we have made significant progress toward our larger goal, and we're very thankful."

The campaign was dedicated to building the permanent funds of three new medical student scholarships named for several local TCOM supporters and leaders in the profession: Stanley Weiss, D.O., vice chairman of TCOM's Department of Public Health and Preventive Medicine, and his wife, Beverly; Constance Jenkins, D.O., and W.R. Jenkins, D.O., two longtime TCOM faculty members who retired in 1991; and James Royder, D.O., who practices family medicine in Hurst and is the father of 1986 TCOM graduate Clayton Royder.

Upp said the foundation hopes to raise \$150,000 for each of the three scholarships over three years.

Co-chairs of the 1994 scholarship campaign were: Mark Baker, D.O., TCOM Class of '76, acting chairman of TCOM's radiology department and Speaker of the TOMA House of Delegates; Steve Buchanan, TCOM Class of '82, associate professor of obstetrics/gynecology at TCOM; Bobby Carter, director of the health science center's Gibson D. Lewis Health Science Library; Michael Emmett-Oglesby, Ph.D., acting chairman of the center's Department of Microbiology and Immunology; John Peckham, D.O., associate professor of manipulative medicine at TCOM and chairman of the Ethics Committee of TOMA's Department

of Professional Affairs; and Gretchen Splivalo, a senior administrative assistant in TCOM's Department of Internal Medicine. Members of TCOM's Student Associate Auxiliary also helped meet the 1994 goal by following up the foundation's mailing with phone calls to faculty and staff.

To contribute to any of the scholarships, call the Office for Development at (817) 735-2613.

## **Lewis Library Expands Services to TOMA Members**

The Gibson D. Lewis Health Science Library at the University of North Texas Health Science Center now offers access to its in-house MEDLINE (1966 to present) to TOMA members who prefer to do their own computer searches for medical information. The service is provided at the discounted rate of \$100 for 25 hours of access, including instruction in using the database. It is available through dial-up modem or Internet.

The library is a resource library in the National Network of Libraries of Medicine for the region and can provide information on the National Library of Medicine's GRATEFUL MED software for IBM or Apple Macintosh computers. This user-friendly software costs about \$30 and allows physicians to directly search the MEDLARS databases. GRATEFUL MED's LOANSOME DOC feature can be used to order full-text articles identified in the computer search.

The library has been providing TOMA members with information services since 1980. These services are provided by the Association at no charge to members, and include MEDLINE searches and \$50 of free patient care photocopying per year. Other databases may be searched for free.

Over the years the library has grown to 120,000 volumes, including more than 4,800 audiovisual titles and 2,000 journal titles. Services include computer searching of over 200 databases, a full service photocopy staff providing same day or next day document delivery for normal requests, and answers to ready reference questions.

To request services, call the Gibson D. Lewis Health Science Library at 817-735-2070, fax at 817-735-2283 or by mail at 3500 Camp Bowie Blvd., Fort Worth, Texas 76107. TOMA members can also call the TOMA 800 number to request library services at 800-444-8662.

## **TCOM Begins Plus-One Residency**

With approval by the American Osteopathic Association this July, Texas College of Osteopathic Medicine at the University of North Texas Health Science Center has begun taking applications for the first "Plus-One" residency training program in osteopathic manipulative treatment.

Plus-One is a new AOA-endorsed residency program allowing osteopathic physicians to build their OMT skills by adding an extra year exclusively for OMT training to a previously completed residency.

Gregory Dott, D.O., F.A.A.O., associate professor in TCOM's Department of Manipulative Medicine and coordinator for the Plus-One program, says TCOM's program is especially valuable to primary care physicians who need more postgraduate training. He says the residency should also be instrumental in increasing physicians' use of OMT in their practices.

The program is open to D.O.s who are licensed to practice in Texas and have completed a one-year rotating internship and a primary residency in some other field. They must be a member in good standing of the AOA and the American Academy of Osteopathy.

TCOM's Plus-One residency is the first to be granted approval by the AOA. Four positions are open for TCOM's first residency, to begin this fall. To receive application information, send a letter of interest to Gregory Dott, D.O. at the TCOM Department of Manipulative Medicine, University of North Texas Health Science Center, 3500 Camp Bowie Blvd., Fort Worth, Texas 76107.

TCOM has one of the largest manipulative medicine departments of the 16 osteopathic medical schools in the nation. The department's seven faculty teach TCOM medical students in 150 hours of required OMT training and practice in the health science center's Manipulative Medicine Clinic.

The University of North Texas Health Science Center is dedicated to providing a healthier future for a changing world through teaching and promoting osteopathic medicine, fostering scientific discovery and delivering quality health care to our community and beyond. The health science center is comprised of its founding medical school, Texas College of Osteopathic Medicine, the Graduate School of Biomedical Sciences and 24 medical clinics throughout the community.



# NOF Accepting Applications for Zeneca Pharmaceuticals Group Scholarship

For osteopathic medical students committed to practicing in underserved or minority populations, help is on the way.

The Zeneca Pharmaceuticals Group Minority Outreach Scholarship, an award of \$5,000 to \$10,000 administered by the National Osteopathic Foundation (NOF) and funded by a grant from Zeneca Pharmaceuticals Group, is now open to receive applications. Osteopathic medical students in their third year of studies may apply.

The scholarship was established to encourage osteopathic medical students to practice in underserved or minority populations, and recipients must demonstrate this commitment. Minority students are encouraged to apply, but participation is not restricted only to those students.

"This scholarship fits perfectly with the osteopathic medical philosophy of serving rural and underserved populations," said Mike Levin, executive director of NOF. "It is the first of its type for NOF, and we are pleased that Zeneca has made it happen."

Applications must be received by January 15, 1995. Finalists will be interviewed. Awards are dispersed during the fourth year of osteopathic medical studies.

A formal award presentation will be held at Zeneca's company headquarters in Wilmington, Delaware. In addition, recipients must submit a written report on their experiences in underserved areas, to encourage other students to serve this population. These papers will be submitted to the osteopathic medical press for publication.

The program will be administered as a forgivable loan. Recipients will be selected by NOF's Committee on Educational Grants.

Students interested in applying for the scholarship may get full details by contacting NOF Headquarters at 5775 Peachtree-Dunwoody Rd.; Suite 500-G, Atlanta, GA 30342; Phone (404) 705-9999, Fax (404) 252-0774.

Zeneca Pharmaceuticals Group is today ranked among the top 20 research-based pharmaceutical companies in the

United States. Zeneca has earned an outstanding worldwide reputation as an innovative research-intensive company dedicated to the highest standards of pharmaceutical discovery, development, and production. Through numerous public awareness campaigns, corporate health programs, and patient assistance programs, Zeneca Pharmaceuticals Group also provides health education and support services to millions of Americans.

Zeneca Inc. is a \$2.4 billion bioscience company with 7,700 employees and 49

manufacturing and research and development sites in the United States. Zeneca Inc. is a wholly-owned subsidiary of the UK-based Zeneca Group PLC, a major \$6 billion international bioscience business.

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. ■

## Yolanda Cervantes Heads OHST's Community Health Care Department

Jay Sandelin, chairman of the board of Osteopathic Health System of Texas, named Yolanda Cervantes, Vice President, Community Health Care last month. Ms. Cervantes' most recent position within the health system has been as Vice President of Utilization Management at Osteopathic Medical Center of Texas.

"I see my new position as a tremendous challenge to assist the health system in maintaining viability through developing and strengthening the community health services provided by OHST," Ms. Cervantes said. "This department has grown a great deal in a short period of time. Credit for that growth must be given to the staff and the vision of both Pat Allison and Jay Sandelin."

Ms. Cervantes' progression to her new position is a natural move since she has held management positions with progressively higher levels of responsibility. She joined OMCT in 1983 as a discharge planner. In 1985, she was promoted to Manager of Discharge Planning. During this time, she implemented an automated computer-based physician referral service. In 1987, she was promoted to Director of Geriatric Health Services where she managed a corporately developed program to link area nursing homes and retirement communities with OMCT. Her appointment as Vice President for Utilization Management

in 1989 increased her knowledge of health system administration and provided her an avenue to expand her responsibilities.

The Community Health Care Department encompasses the administrative operation of OHST's eight clinics (five Osteopathic Family Medicine Clinics and three clinics located in rural areas). Ms. Cervantes' department also oversees OHST's managed care component by recruiting physicians for the Texas Independent Osteopathic Physicians Association (TIOPA), and developing the association's scope to assist osteopathic physicians throughout the state. Other aspects of the health system that fall under the Community Health Care include the Medical Center Pharmacy and Home Health Care.

A Texas native, Ms. Cervantes earned her master's degree in health care administration in August 1994 from Texas Woman's University. She earned her bachelor's degree in social work from Texas Woman's in 1973.

With 265 beds, OMCT is the largest osteopathic institution in Texas. This non-profit medical center serves as a primary teaching hospital for the University of North Texas Health Science Center at Fort Worth, formerly the Texas College of Osteopathic Medicine. OMCT is located in the heart of Fort Worth's Cultural District at 1000 Montgomery Street. ■



# Opportunities Unlimited

## PHYSICIANS WANTED

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

**DALLAS AREA GP CLINIC** needs associate doctor on locum tenens. 6-50 hours per week. Call 214/941-9200. (02)

**RAPIDLY EXPANDING FAMILY PRACTICE** in East Texas, near Tyler, needs Associate immediately. Please contact: Steve E. Rowley, D.O., FFAFP, P.O. Box 368, Chandler, Texas 75758; (903) 849-6047. (01)

**OB/GYN AND FAMILY PRACTICE D.O.S** – Practice opportunities for physicians at 54-bed facility in beautiful Tyler, Texas. Active staff of over 30 physicians with 8 specialties represented. Office space available near hospital or may share established, very active practice 20 minutes from Tyler. Outlying clinics located in 4 nearby communities. Hunting, fishing, watersports, country clubs, university, junior college, many recreational facilities, civic and social opportunities. Contact Olie E. Clem, C.E.O., at 903/561-3771. (33)

**INTERNAL MEDICINE** – Immediate opening for BE/BC internal medicine D.O. at 54-bed hospital in Tyler, Texas. Approximately 30-member referral base with multiple specialties. Office space available within medical complex or in outlying clinic. Hunting, fishing, watersports, country clubs, university, junior college, many recreational facilities, civic and social opportunities. Contract Olie E. Clem, C.E.O., at 903/561-3771. (34)

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

**PART-TIME OR FULL-TIME LIGHT CLINIC** – Texas-owned contract group staffing several state prison clinics 40 hrs. per week. Work as an independent contractor, with competitive compensation, flexible hours, and medical malpractice provided. Other opportunities include slow to moderate

emergency departments and clinics throughout Texas. Contact Southwest Medical Associates, Inc., Carol Douglass, 1-800-929-4854. (29)

**ORTHOPEDIC SURGEON** – To join established practice in Tyler, Texas. Salary guarantee with office and support services provided. Office located within hospital complex. Wonderful family community offers hunting, fishing, watersports, golf, country clubs, university (U.T.), junior college, many recreational facilities, civic and social opportunities and much more. Contact Olie E. Clem, C.E.O., or James E. Laughlin, D.O. at 903/561-3771. (39)

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

**WANTED** – Associate with ultimate goal to take over established family practice in Denton. Contact: TOMA, Box 4, One Financial Center, 1717 North IH-35, Suite 100, Round Rock, TX 78664-2901. (04)

**TRY RURAL MEDICINE** – Experience the challenge of rural medicine on a part-time, flexible basis by working as a locum tenens physician. Call the Center for Rural Health Initiatives at 512-479-8891. (20)

**HISTORICAL COMMUNITY IN SOUTH EASTERN ARIZONA** – Actively recruiting BE/BC Primary Care physicians. Rural area easy access to Tucson/Phoenix metro areas. Well supported small office setting within hospital campus area. Give us a call for more information. Chris Cronberg, C.E.O., Northern Cochise Community Hospital, Willcox, Arizona 85643; (602) 384-3541. (24)

**WANTED: FP/GP FOR EXPANDING BUSY FAMILY PRACTICE** – No hospital. No OB. Good Hours. Salary negotiable. Spanish helpful but not absolutely necessary. Board Cert. of Eligibility also helpful but not absolutely necessary. Send CV via FAX to 1-713-675-9126. (25)

## POSITIONS DESIRED

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

## OFFICE SPACE AVAILABLE

**GULF COAST CLINIC** – 4,100 sq. ft. to include lab and (4) suites. Near Navy base on beautiful Gulf of Mexico. Growing Community. Hospital and nursing home three blocks away. Lease (possible purchase in future). Contact Mrs. Kumm 512/758-3660. (17)

**AUSTIN, TEXAS AREA** – Family Practice for sale. Well established 17-year-old practice located in rapid growth area, North West suburb of Austin, Texas. Gross \$400,000 +. Everything available to start or transfer your practice. Terms negotiable. Please contact Business Manager at 512-258-2586 or after 8:00 p.m. at 512-267-1206. (22)

## MISCELLANEOUS

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

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

**ASSUME LEASE PAYMENTS** – Have QBC (Becton-Dickson) entire set up and Dupont Analyst with Medica Easylyte NA/K Analyzer (new probes) available. Call for pay off. Great for multiple physician clinic or rural health clinic. Can save close to half of original cost of Analyst. Call Dr. N.B. Chasteen 806/481-3200 or write P.O. Box 387, Farwell, Texas 79325 for more information. (10)

**FULL TIME PROGRAM DIRECTOR** – for Family Practice Residency Program available in Texas. Residency training preferred. Board certification required. Salary, malpractice, vacation and incentive bonus offered. Contact Doctors Hospital in Groves, Texas, Medical Education Department at (409) 963-5136, or fax CV to Judy Prewitt at (409) 963-5147. (40)

**FORT WORTH PROPERTY FOR SALE** – 150' 1412-08-04 on Montgomery Street across from museums and Will Rogers, zoned C, consists of three brick veneer homes, all leased – Llewellyn Realty, Inc., 817/737-3103, Carter Llewellyn 731-6895. (26)



# How do you treat severe paralysis of the paycheck?

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

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<sup>1</sup> 1985 Commissioner's Individual Disability Table-A, Seven-day Elimination Continuance Table. Rates are male only. Disability rates are higher for females.

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

<sup>3</sup> Coverage for mental disorders can be limited in certain circumstances for a reduced premium.

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