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## IMPORTANT PHONE NUMBERS

American Osteopathic Association	312-280-5800 800-621-1773
Washington Office	202-783-3434
American Osteopathic Hospital Association	312-952-8900
Professional Mutual Insurance Company	800-821-3515 816-523-1835
TOMA Malpractice Insurance Program	
For Premium Rates	800-392-2462
For Enrollment & Information	713-496-3400
Texas College of Osteopathic Medicine	817-735-2000 Dallas Metro 429-9120
Medicare Office:	
Part A Telephone Unit	214-470-0222
Part B Telephone Unit	214-647-2282
Profile Questions	214-669-7408
Provider Numbers:	
Established new physicians (solo)	214-669-6162
Established new physicians (group)	214-669-6163
All changes to existing provider number records	214-669-6158
Texas Medical Foundation	512-329-6610
Medicare/Medicaid General Inquiry	800-252-9216
Medicare Beneficiary Inquiry	800-252-8315
Medicare Preadmission/Preprocedure	800-252-8293
Private Review Preadmission/Preprocedure	800-252-9225
Private Review General Inquiry	800-252-9225
Texas Osteopathic Medical Association	817-336-0549 in Texas 800-772-5993 Dallas Metro 429-9755
TOMA Med-Search	in Texas 800-772-5993
TEXAS STATE AGENCIES	
Department of Human Services	512-450-3011
Department of Public Safety	
Controlled Substances Division	512-465-2188
TriPLICATE Prescription Section	512-465-2189
State Board of Health	512-458-7111
State Board of Medical Examiners	512-452-1078
State Board of Pharmacy	512-832-0661
State of Texas Poison Center for Doctors & Hospitals Only	713-765-1420 800-392-8548 Houston Metro 654-1701
FEDERAL AGENCIES	
Drug Enforcement Administration	
For state narcotics number	512-465-2000 ext. 3074
For DEA number (form 224)	214-767-7250
CANCER INFORMATION	
Cancer Information Service	713-792-3245 in Texas 800-392-2040

# Texas DO

Texas Osteopathic  
Medical Association

September 1987

## FEATURES

### Hospitals Introduce Physicians Serving Internships or Residencies

*Texas Osteopathic Hospitals introduce their new interns and residents to the TOMA membership.*

### H & I Committee Resolves Disputes Involving Physicians, Carriers, Hospitals and Patients

*The Hospitals and Insurance Committee has been conducting meaningful peer review for over 30 years.*

### Texas Delegates Report on AOA House

*Texas Delegates update TOMA members on resolutions voted on at the AOA meeting in July.*

### In Memoriam

*E. W. Cain, D.O.  
Donald L. Eakin, D.O.*

### A Necessary Evil

*As it now stands, the "quick fix" to help balance the State of Texas' checkbook is essentially increasing taxes that already exist.*

### HCFA Awards TMF 16-month Contract

*The 16-month contract to run from June 1, 1987 to September 30, 1988, was awarded by the HCFA, the federal agency that oversees the Medicare program.*

## DEPARTMENTS

### Calendar of Events

### Texas Ticker Tape

### News From the Auxiliary

### For Your Information

### Practice Locations in Texas

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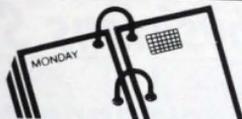
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Tom Hanstrom, Editor

Diana Finley, Associate Editor

Lydia Anderson Smith, Staff Writer

# CALENDAR OF EVENTS



## SEPTEMBER

11

TOMA Board of Trustees —  
Mid-year Meeting  
State Headquarters Building  
Fort Worth, Texas  
10:00 a.m.

Contact: Tom Hanstrom  
Executive Director  
1-800-772-5993 or  
metro 429-9755 or  
336-0549

12

TOMA Leadership Conference  
State Headquarters Building  
Fort Worth, Texas  
8:00 a.m.

Contact: Tom Hanstrom  
Executive Director  
1-800-772-5993 or  
metro 429-9755 or  
336-0549

13



National Osteopathic Medicine Week  
September 13-19, 1987

15

Presidential Visit  
TOMA District II Meeting  
Colonial Country Club  
Fort Worth  
6:30 Cocktails  
7:30 Dinner

Contact: Suzanne Reeves  
735-3543

17

Presidential Visit  
TOMA District XV Meeting  
Sheraton Park Centre  
Arlington  
6:30 Cocktails  
7:00 Dinner

Contact: R. Greg Maul, D.O., President  
265-1306

19

Presidential Visit  
TOMA District III Meeting  
Holly Tree Country Club  
Tyler  
1:00 Program  
6:30 Dinner

Contact: Rodney Wiseman, D.O.  
President  
214-839-4396

25

Presidential Visit  
TOMA District VIII Meeting  
Call Jayne Knight, D.O. for details  
512-387-4294

26

Presidential Visit  
TOMA District XIV Meeting  
Call Joe Montgomery-Davis, D.O.  
for details  
512-689-2493

27

Presidential Visit  
TOMA District IX Meeting  
Call Duane Tisdale, D.O. for details  
512-578-9821

## OCTOBER

3

Presidential Visit  
TOMA District XII Meeting  
Call Thomas Noonan, D.O.  
for details  
409-962-1511

4

Annual Meeting  
American Osteopathic Association  
Sheraton World  
Orlando, Florida

Contact: Ann Wittner, Director of  
Administration  
312-280-5814 or  
800-621-1773

25

25-27  
Primary Care Update IV  
Texas College of Osteopathic  
Medicine — Depts. of CME  
and Medicine  
TCOM Campus, Fort Worth  
CME Hours: 11 Category 1-A

Contact: Cheryl Cooper, Coordinator  
Dept. of CME, TCOM  
Camp Bowie at Montgomery  
Fort Worth, Texas 76107  
817/735-2539

## Upcoming Events

TOMA Public Health Seminar/  
Legislative Forum  
December 5-6, 1987  
Hilton Hotel  
Arlington, Texas

TOMA Annual Convention  
April 28-30, 1988  
Marriott Galvez Hotel/  
Moody Civic Center  
Galveston, Texas

# Hospitals Introduce Physicians Serving Internships or Residencies

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

Among the new interns and residents already hard at work for the 1987-88 year are:

## Brooke Army Medical Center

Brooke Army Medical Center's two osteopathic interns began their duties in a transitional internship training program on July 1.

Scott A. Stanek, D.O., was born in San Francisco, California. He received his B.S. degree in 1982 at Vanderbilt University and his D.O. degree from the University of Health Sciences/College of Osteopathic Medicine, Kansas City, Missouri. Dr. Stanek is a participant in the government's Health Professions Scholarship Program.

Eric D. Vogel, D.O., was born in Oak Park, Illinois. He received his B.S. degree in 1983 at the University of Illinois/Urbana and his D.O. degree from the Chicago College of Osteopathic Medicine. Dr. Vogel is also a participant in the government's Health Professions Scholarship Program.



Dr. Stanek



Dr. Vogel

## Corpus Christi Osteopathic Hospital

Seven interns have begun their internship training at Corpus Christi Osteopathic Hospital. They are as

follows:

W. Thomas Crow, D.O., is a graduate of Texas College of Osteopathic Medicine. Hailing from Fort Worth, Dr. Crow and his wife, Janet, are the parents of one child.



Dr. Crow

Joel G. Eldridge, D.O., is a native of Winnboro, Louisiana. He received his D.O. degree from Kirkville College of Osteopathic Medicine.

Leah P. Holly, D.O., is another graduate of Texas College of Osteopathic Medicine. Dr. Holly is from Dallas.

Yet another TCOM graduate is Joe W. Morrow, D.O. A native of Fort Worth, Dr. Morrow and his wife, Jayne, have two children.



Dr. Eldridge



Dr. Holly



Dr. Morrow

Susan M. Palmer, D.O., received her D.O. degree from the University of Health Sciences/College of Osteopathic Medicine in Kansas City, Missouri. Dr. Palmer is a native of Tunkhannock, Pennsylvania.

Robert S. Powell, D.O., is from Westbrook, Maine and a graduate of the University of New England College of Osteopathic Medicine. He is married to Jane.

Ronald M. Schwartz, D.O., from Phoenix, Arizona.

received his D.O. degree from Kirksville College of Osteopathic Medicine. Dr. Schwartz is married to Shervon.



Dr. Palmer



Dr. Powell



Dr. Schwartz

his B.A. in biology.

Stephen Trammell, D.O., is a native of Gainesville, Texas, and a TCOM graduate. He attended North Texas State University in Denton. Dr. Trammell also attended the Dallas Baptist University where he earned his B.S. in biology.

Siena Shields, D.O., a native of Pottsville, Pennsylvania, graduated from the University of Health Sciences/College of Osteopathic Medicine in Kansas City, Missouri. She attended Wilkes College in Wilkes Barre, Pennsylvania, where she earned her B.A. in biology and psychology.

Carol Rahter, D.O., a native of Kansas City, Missouri, received her D.O. degree from the University of Health Sciences/College of Osteopathic Medicine. Dr. Rahter also attended St. Louis University in Missouri where she earned her B.S. in biology.

Rhodesia Lastrap, D.O., of Houston, received her D.O. degree from TCOM. She attended Xavier University in New Orleans, Louisiana, where she earned a B.S. in biology.

Trudy Fedorko, D.O., is a native of Rochester, New York, and received her D.O. degree from TCOM. Dr. Fedorko attended Texas A&M University, North Texas State University and the University of Texas at Arlington, where she majored in biology and art.

Dallas Family Hospitals' two residents include:

Jane Hewes, D.O., attended the University of Texas at Arlington and received her D.O. degree from TCOM in 1986. She was part of the 1986-87 intern class at Dallas Family Hospital and is presently in a family practice residency.

Craig Yetter, D.O., attended Purdue University in West Lafayette, Indiana. A 1986 TCOM graduate, Dr. Yetter also interned at Dallas Family Hospital from 1986-87. He is currently taking a residency in family practice.

## Dallas Family Hospital

Eight new interns and two residents have begun their training at Dallas Family Hospital.

Members of the 1987-88 intern class are:

Jaime Vasquez, D.O., a native of Marfa, Texas, is a graduate of Texas College of Osteopathic Medicine (TCOM). Dr. Vasquez earned his B.S. in biomedical science at Texas A&M University in College Station.

Joseph Moran, D.O., is a native of Henderson, Nevada. He received his D.O. degree from the Oklahoma College of Osteopathic Medicine and Surgery, and his B.S. and M.S. in chemistry at Northwestern Oklahoma State University in Alva. Dr. Moran also attended the University of Oklahoma in Norman.

David Winslow, D.O., a native of Dallas, received his D.O. degree from TCOM. He attended Texas A&M University in College Station. Dr. Winslow also attended the University of Texas in Austin, where he earned



back row standing (l-r) — Drs. Vasquez, Moran, Trammell and Winslow; front row seated (l-r) — Drs. Shields, Rahter, Lastrap and Fedorko.

## Dallas/Fort Worth Medical Center

Thirteen newly graduated doctors of osteopathic medicine have begun their internships at Dallas/Fort Worth Medical Center, Grand Prairie, gaining the experience required to either further their postgraduate training or begin their practices next year.

Nancy Bafus, D.O., a native of Spokane, Washington, graduated from the University of Texas, Austin, and received her D.O. degree from TCOM. She is married to Jeff Thompson, D.O.

Andrew Clemmons, D.O., a native of San Angelo, graduated from Angelo State University and received his D.O. degree from TCOM. He is married to Amy.

Susan P. Dalton, D.O., received her B.A. degree from Stephens College, Columbia, Missouri, and her D.O. degree from TCOM. Dr. Dalton and her husband, Donald are the parents of two children.

Anna Hade Duncan, D.O., is from Ontario, Canada. She graduated from Southern Methodist University and is a TCOM graduate. She is married to Michael.

Alfred R. Frye, D.O., from Spartanburg, South Carolina, graduated from the University of South Carolina. He received his D.O. degree from TCOM.

Dennis N. Glascock, D.O., lists Seguin as his hometown. He graduated from Northeast Missouri State University and received his D.O. degree from Kirksville

College of Osteopathic Medicine. Dr. Glascock is married to Kathleen.

Laura Hempstead, D.O., of River Falls, Wisconsin, graduated from Coe College and received her D.O. degree from TCOM. She is married to Stanley Smith.

Darrell Herrington, D.O., hails from Arlington, Texas. He graduated from U.T. Arlington and received his D.O. degree from TCOM.

David Monjay, D.O., from Sulphur, Oklahoma, graduated from S.W.O.S.U. in Weatherford, Oklahoma. He received his D.O. degree from Oklahoma College of Osteopathic Medicine and Surgery.

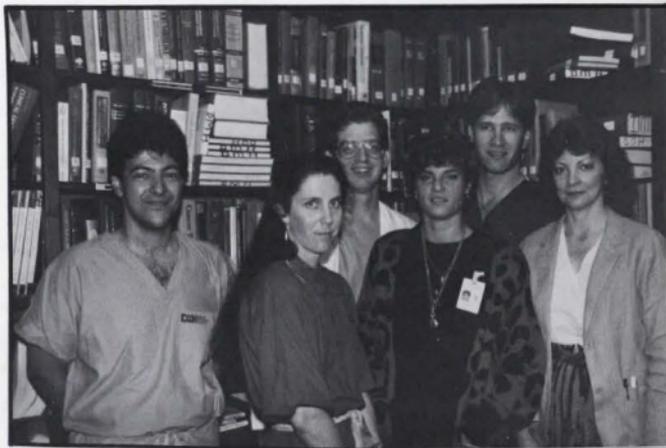
Jamie Nivens, D.O., graduated from Stephen F. Austin State University in Nacogdoches. He received his D.O. degree from TCOM.

Scott Stowers, D.O., graduated from Southwestern Oklahoma State University and received his D.O. degree from TCOM. He is married to Becky.

Leon Swift, D.O., attended Iowa State University and Drake University. His D.O. degree was received from TCOM.

Wayne Templin, D.O., is from Irving, Texas. He attended Northlake College and Texas Christian University. He received his D.O. degree from TCOM. Dr. Templin is married to Kimberly Re'.

## Dallas Memorial Hospital



(l-r) - Drs. Crea, Hattier, Mallowney, Shughrue, Cohen and Pangle

Dallas Memorial Hospital has six new interns presently in training as well as two residents.

The six interns are as follows:

Barry Cohen, D.O., a native of California, received his D.O. degree from the University of Health Sciences/College of Osteopathic Medicine in Kansas City, Missouri. Dr. Cohen plans on entering general practice.

Joseph Crea, D.O., is from Ohio. He received his D.O. degree from the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa. Dr. Crea is planning on entering the field of emergency medicine.

Juli Hattier, D.O., born in Stuttgart, Germany, graduated from the West Virginia School of Osteopathic Medicine. She is moving towards her goal of practicing family medicine.

James Mullooney, D.O., is a native Texan, hailing from Tyler. He is a graduate of TCOM and is interested in specializing in family medicine.

Alice Pangle, D.O., is also a graduate of TCOM. She is originally from Columbia, South Carolina, but plans to remain in Texas and practice general and family medicine.

Cynthia Shughrue, D.O., is a native of San Diego, California, and a graduate of the University of Health Sciences/College of Osteopathic Medicine. Dr. Shughrue plans to remain in Dallas and practice general and family medicine, specializing in obstetrics and gynecology.

Dallas Memorial Hospital's two residents are:

Edward Panousieris, D.O., a native of California, is a graduate of the University of Health Sciences/College of Osteopathic Medicine. Dr. Panousieris has decided to practice family medicine.

Candy Ting, D.O., was born and raised in Malaysia. She graduated from the Oklahoma College of Osteopathic Medicine in Tulsa. Dr. Ting is also planning a career in family medicine.

The 1987-88 intern class of Doctors Hospital consists of:

David Elliott, D.O., a native of Temple, earned his B.S. in Mechanical Engineering from the University of Texas, Austin. He is a 1987 graduate of TCOM. While at TCOM, Dr. Elliott was a member of Sigma Sigma Phi, National Osteopathic Medicine Society and Phi Beta Phi, medical fraternity. He is married to Jane Sallee, and has two daughters; Mary Ann, a sophomore at Rice University, and Jennifer, a senior in high school. Following completion of his internship, Dr. Elliott plans to remain in Texas and enter into family practice medicine.

Kevin Hudson, D.O., is a native of Woodville, Texas. He is a 1982 graduate of Texas A&M University where he obtained a B.S. in Microbiology. He is a 1987 TCOM graduate, and while at TCOM, was a member of Sigma Sigma Phi, Phi Beta Phi, ACPG and the Student Government Association. Dr. Hudson is married to Pam, a physical therapist. Upon completion of his internship, Dr. Hudson plans to enter into a residency.

Janice Mudd, D.O., is a graduate of the University of Osteopathic Medicine and Health Sciences in Des Moines, Iowa. She received her undergraduate degree in Psychology/Zoology from Texas A&M University in 1972 and also holds a M.Ed. degree in general counseling. Dr. Mudd was involved in postgraduate research in the Department of Biochemistry at the University of Texas Medical Branch in Galveston from 1973-76. She is married to Tom Mullholland, an architect in Houston.

Sharon O'Day, D.O., a native of St. Louis, Missouri, graduated from the DePaul School of Nursing in 1970, and obtained her BSN from Old Dominion University in Norfolk, Virginia in 1978. She changed her residence to Seabrook, Texas in 1980 and began her osteopathic medical education at TCOM in 1983. During her years at TCOM, Dr. O'Day was a member of Delta Omega Sigma Phi, ACPG and Phi Beta Phi. Dr. O'Day and her husband, Denny, are the parents of two children. Following her internship, she plans to enter a residency in dermatology.

## Doctors Hospital - Groves



(l-r) - Drs. Hudson, Mudd, O'Day and Elliott

## Fort Worth Osteopathic Medical Center

Fort Worth Osteopathic Medical Center welcomed 19 new interns on July 1, 1987. Sixteen of these physicians are TCOM graduates; one is a graduate of Kirksville College of Osteopathic Medicine; one graduated from New York College of Osteopathic Medicine and one new intern received her D.O. degree from Chicago College of Osteopathic Medicine.

The new class, comprised of 10 men and nine women, is as follows:

Michael Armstrong, D.O., a TCOM graduate, re-

ceived a B.A. in chemistry from S.M.U. in 1970, and a B.S. in pharmacy from the University of Texas in 1972. Dr. Armstrong was born in Dallas.

D. J. Beach, D.O., came to TCOM from the University of Colorado, where he received his B.A. in biology in 1981. Dr. Beach was born in Lincoln, Nebraska.

Janice Butchee, D.O., born in Crowley, Louisiana, received her D.O. degree from TCOM. She also holds a B.S. degree in medical technology from Lamar University.



*Dr. Armstrong*



*Dr. Beach*



*Dr. Butchee*

Mary Caffrey, D.O., is another TCOM graduate. She received a B.S. degree in biology from Mary Washington College, Virginia, in 1970, and a master of science degree in anatomy from Colorado State University in 1977.

Samuel Coor, D.O., comes to FWOMC from New York College of Osteopathic Medicine. Dr. Coor attended New York University and Utah State University, receiving his B.S. degree in biology from Utah State in 1983.

Larry Huber, D.O., a TCOM graduate, was born in Indianapolis, Indiana. He attended El Paso Community College and the University of Texas at El Paso.



*Dr. Caffrey*



*Dr. Coor*



*Dr. Huber*

Marian Keyser, D.O., another TCOM graduate, was born in Youngtown, Ohio. She received her bachelor's and master's degrees from Ohio State University in 1969 and 1971. Dr. Keyser also attended Kent State University.

Terri King, D.O., is a TCOM graduate. She holds a B.S. degree in psychology from Southwest Texas State University in 1983. Dr. King was born in Fort Worth and is a sister to another of FWOMC's interns, Dr.

Tracy Papa.

Clare Laminack, D.O., born in San Antonio, received her D.O. degree from TCOM. She attended the University of Texas at Austin and San Antonio, the University of Missouri and San Antonio College. Dr. Laminack received a B.S. degree in speech pathology from the University of Texas at Arlington in 1966, and a M.A. in speech/language pathology from the University of Missouri in 1973.



*Dr. Keyser*



*Dr. King*



*Dr. Laminack*

Carl Luther, D.O., is another out-of-state intern, receiving his D.O. degree from Kirksville College of Osteopathic Medicine. He holds a bachelor of science degree in biology and chemistry from Oral Roberts University. Dr. Luther is a native of Washington.

Suzanne McTague, D.O., born in Brooklyn, New York, received her D.O. degree from TCOM. She received her undergraduate degree in business administration and management from Virginia Commonwealth University in 1982.

Laurie Nycz, D.O., a TCOM graduate, was born in Chicago, Illinois. She attended North Texas State University, Texas Christian University, and Texas Women's University. Dr. Nycz received her bachelor's degree in nursing from TCU in 1974.



*Dr. Luther*



*Dr. McTague*



*Dr. Nycz*

Tracy Papa, D.O., is another TCOM graduate and sister to FWOMC intern Terri King, D.O. Dr. Papa attended North Texas State University and Southwest Texas State University, receiving her degree in biology from SWTSU in 1982.

Jay Pearce, D.O., a TCOM graduate, was born in Norman, Oklahoma, but attended high school and college in Texas. He received a B.A. degree in biology

cal science from TCU in 1968, and his M.A. degree in the same field from UTA in 1981.

John Priestley, D.O., a TCOM graduate, was born in Salem, New Jersey, and attended high school in that state before moving to Texas. He graduated cum laude from North Texas State University, with a B.S. degree in community health and biology. Dr. Priestley also attended Dallas County Community College and Texas A & I University.



*Dr. Papa*



*Dr. Pearce*



*Dr. Priestley*

Jim Prince, D.O., born in Pueblo, Colorado, received his D.O. degree from TCOM. He earned his associate degree in radiology technology in 1978 from Tulsa Junior College and his bachelor's degree as a physician assistant in 1981 from the University of Texas Health Science Center in Dallas.

A. Duane Selman, D.O., another TCOM graduate, is a Fort Worth native. He holds two associate degrees, one in criminal justice and one in fire technology, both from Tarrant County Junior College. Dr. Selman also attended the University of Texas at Arlington and the NCT-COG Regional Police Academy.

Nancy Terrian, D.O., born in Pittsburgh, Pennsylvania, received her osteopathic education at Chicago College of Osteopathic Medicine. She earned her bachelor's degree in psychology from the University of Illinois in 1980. Dr. Terrian also attended Saginaw Valley State College in Michigan.



*Dr. Prince*



*Dr. Selman*



*Dr. Terrian*



*Dr. Wasson*

## Northeast Community Hospital

Northeast Community Hospital in Bedford reports that eight new interns are currently engaged in their internship training.

The interns are:

Mike Bell, D.O., a native of Fort Worth, earned his B.S. degree in microbiology at Texas Tech University. He is a 1987 graduate of TCOM.

John Coppedge, D.O., born in Dallas, received his B.A. degree in biology at Austin College. Dr. Coppedge is also a 1987 TCOM graduate.

Michael Keleher, D.O., born in Tulsa, Oklahoma, received his B.S. degree from Oklahoma State University. He is a 1987 graduate of Oklahoma College of Osteopathic Medicine and Surgery.



*Dr. Bell*



*Dr. Coppedge*



*Dr. Keleher*

Keith Kucera, D.O., was born in Champaign, Illinois. A graduate of the University of Iowa, Dr. Kucera received his D.O. degree from Kirksville College of Osteopathic Medicine in 1987.

Rod McCrory, D.O., was born in Blackwell, Oklahoma. He received a B.S. degree in pharmacy from Southwestern Oklahoma State, and a B.S. in biology from Central Oklahoma State. Dr. McCrory is a 1987 graduate of Oklahoma College of Osteopathic Medicine and Surgery.

Hamid Moayad, D.O., was born in Tehran, Iran. He earned his B.S. degree in biology at the University of Texas at Arlington. Dr. Moayad is a 1987 graduate of TCOM.



Dr. Kucera



Dr. McCrory



Dr. Moayad

Ron Raelson, D.O., was born in Valparaiso, Indiana. He received an A.B. degree from Indiana University and an M.S. degree from the University of Minnesota. Dr. Raelson graduated with honors from Oklahoma College of Osteopathic Medicine and Surgery in 1987.

Meg (Harris) Walter, D.O., a metroplex native, graduated Magna Cum Laude from Texas Wesleyan College with a B.S. in biology. She is a 1987 TCOM graduate.▲



Dr. Raelson



Dr. Walter

## DIC - NOVUS Hires New Director

Earlene P. Schaaf, R.N., B.S.N., recently was named as director for the Diagnostic Imaging Centre and NOVUS: The Woman's Diagnostic Breast Center, 3825 Camp Bowie Boulevard in Fort Worth. Ms. Schaaf previously was employed as Rehabilitation Specialist with Intracorp, based in the Dallas/Fort Worth office.

Ms. Schaaf has worked within the health care field for 11 years, two of which were spent gaining business and management experience. A native of Fort Worth, Schaaf graduated from Paschal High School and received her Bachelor of Science Degree in Nursing from Texas Christian University.

Diagnostic Imaging Centre offers a full range of diagnostic tests, including CT scans, ultrasound, fluoroscopies and x-rays. NOVUS is one of the leading centers in the area devoted entirely to detecting breast cancer. Both opened in December of 1985 as a joint venture between Westside Radiology Consultants and Health Care of Texas, Inc.▲

## Dallas Family Hospital Installs Medical Staff Officers

In ceremonies at the Anatole Hotel, Dallas Family Hospital (DFH), southwest Dallas County's newest hospital recently installed medical staff officers for the 1987-88 term.

J. L. LaManna, D.O., will serve his fourth term as the hospital's chief-of-staff. Donald Vedral, D.O., was elected vice chief-of-staff and Louis Zegarelli, D.O., was elected secretary-treasurer for the new term. Manual Griego, D.O., was appointed the medical staff's member to the hospital's executive committee and R.M. Carmichael, D.O., will serve as the staff's representative to the DFH Board of Governors.

Dr. LaManna, a long time Oak Cliff resident and

physician, also serves as chairman of the board of Dallas Southwest Osteopathic Physicians, Inc. (DSWOP). DSWOP has awarded more than one million dollars to non-profit organizations primarily in the Oak Cliff area.

Dallas Family Hospital, which opened its doors at the site of 2929 South Hampton Road, has opened a new office building in conjunction with DSWOP. This is the third unit on the hospital's 18 acre campus. Other units include a 104 bed, all private room hospital and a medical education building.

Dallas Family Hospital is owned by Universal Health Services, King of Prussia, PA.▲

# TEXAS TICKER TAPE

## AOHA ANNOUNCES RELOCATION

Effective August 10, the American Osteopathic Hospital Association (AOHA) and its affiliated organizations, the College of Osteopathic Healthcare Executives, the American Osteopathic Hospital Research and Education Foundation and the Political Action Committee of AOHA, has completed the consolidation and relocation of headquarters and staff to 1454 Duke Street, Alexandria, Virginia 22314. The phone number is 703-684-7700. Please make note of this change.

## NEW PRESIDENT FOR WVSOM

The West Virginia School of Osteopathic Medicine has named Olen E. Jones, Jr., Ph.D., as president. Dr. Jones previously served as vice-president for support services at Marshall University in Huntington, West Virginia. Dr. Jones succeeds Clyde B. Jensen, Ph.D., who assumed the presidency of the Oklahoma College of Osteopathic Medicine.

## AOA REPORTS ON INTERN MATCH PROGRAM

The AOA Department of Education has reported that as of June 23, 1,396 students have been matched through the 1987-88 Intern Registration Program, with results almost identical to last year. Twenty-seven positions are presently available at 16 AOA-approved hospitals and the list of available positions may be obtained through the AOA Department of Education.

## HOSPITAL EQUIPMENT LOANS DISCOUNTED

According to the July issue of *Texas Hospitals*, published by the Texas Hospital Association, documents have been signed by members of the Texas Hospital Equipment Financing Council (THEFC) which lower the loan discount rate to two percent for hospital equipment loans. Chairperson Meg Read stated that "...the renegotiated loan discount rate makes the THEFC program most competitive with similar pooled programs." Additionally, the two percent loan discount will be forgiven to borrowing hospitals when the origination costs of the program have been earned. More information can be obtained through the Texas Hospital Association.

## CALIFORNIA RESIDENT SHIFTS MAY BE LIMITED

Following New York State's lead (see August *Texas DO*), California legislators are proposing legislation to limit the work schedules of residents. The bill would limit shifts to 18 hours within any 24-hour period. It would also give hospitals the authority to charge residents a fee in order to supplement their work forces.

California legislators are currently studying the issue with input from such sources as hospital officials and medical students. A hearing is planned for November 16, 1987.

## RESPONSES NEEDED ON H. R. 1144

On July 15, TOMA members received a letter, from the state Headquarters, urging support of H.R. 1144, the United States-Mexico Border Health Education and Training Act of 1987. If any TOMA members have acted upon this issue and have received responses from congressional representatives, we would be most appreciative if copies of the responses are forwarded to the TOMA State Headquarters. This will enable us to get a better feel of where this particular piece of federal legislation is headed.

We thank you for your assistance in this matter.

## PATIENT VISITS PER PHYSICIAN DECLINE IN '86

The American Medical Association's (AMA) Center for Health Policy Research, as reported in *American Medical News*, reports that total patient visits per physician decreased in 1986, as part of a 2.1 percent annual rate of decline since 1982.

Citing figures from the AMA's Socioeconomic Monitoring Survey (SMS), the overall decrease was caused mainly by a six percent decline in inpatient hospital visits. However, patient visits increased in physicians' offices, ambulatory care centers, and hospital outpatient departments and emergency rooms.

The study shows an increase in office visits in 1986, a contrast from a 1982-85 average annual decrease of 1.9 percent. The report indicates that medical specialists have been most successful in increasing patient volume.

# H & I Committee Resolves Disputes Involving Physicians, Carriers, Hospitals and Patients

All physicians should be aware of the fact that TOMA has a successful appeals mechanism for resolving disputes involving physicians, health insurance carriers, hospitals and patients, through its Hospitals & Insurance & Peer Review Committee.

This committee has been conducting meaningful peer review for over 30 years and access to the committee is available to osteopathic physicians, patients, hospitals and health insurance carriers, including Federal aid programs and workman's compensation cases.

Cases are thoroughly evaluated and considered during the meetings, which are held at the TOMA State Headquarters every other month, and involved parties are informed of recommendations/suggestions. Composed of osteopathic physicians in various specialties, insurance representatives, hospital administrators and the TOMA executive director, the committee has gained a reputation for impartiality and integrity, due to a long record of successfully resolved issues. Because of its favorable reputation, recommendations are generally accepted by carriers and the like.

The review procedure calls for complaints to be reduced in writing and forwarded to the TOMA State Headquarters. Additional information and documentation may be

informed evaluation; osteopathic physicians are usually asked for a narrative presenting their perception of what transpired, and out-

## Take Time to Talk with Your Patients

lining extenuating circumstances, if necessary; and hospitals may be asked for medical records pertinent to a case.

For our physicians, an important function is the assistance rendered by the committee in cases when there is a claim between them and a carrier with regards to a dispute over payment of fees for services provided. Physicians can avoid unnecessary frustration by utilizing the resources of this committee, which exists to serve you, as well as the public.

We would like to mention a fact that many physicians may not be aware of. The TOMA staff receives calls, at times, from patients momentarily "hot under the collar" at their physicians. It is interesting to note that the majority of these calls are one-sided conversations whereby the patient obviously just feels the need to vent his or her anger, for whatever reason, towards a physician. TOMA staff simply listens to these individuals, anywhere from five to 30 minutes, and when the individual is spent, the end result is they feel better. Virtually all calls of this nature are never referred to the H&I Committee by the patients, because as stated already, the nature

of these calls are usually prompted by momentary anger. In fact, these patients are seemingly very dedicated to their physicians as attested by their usual closing statement, which is, "I don't want to get my doctor in trouble."

Most of these calls deal with the complaint that, "My doctor just won't take the time to talk to me". Perhaps it is time for physicians to review their methods when dealing with patients such as these. Of course, it would be totally unreasonable to sit with a patient for 30 minutes after an exam, however, maybe an extra five minutes or so with a patient could be worked into the schedule, at which time questions could be asked and answers given. Many

## Develop a Call-back Policy

physicians have specified times during the day at which time they will receive phone calls. It could be that patients are not aware of this and some of their frustrations could be alleviated somewhat if they knew about a policy of this nature. If you don't have a "call-back" time during the day, it could be a very beneficial move to institute one.

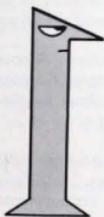
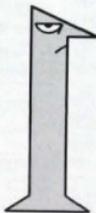
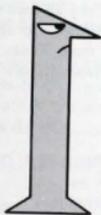
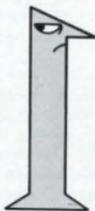
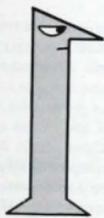
In essence, we felt it might be enlightening for physicians to know just what type of phone complaints are handled through TOMA. To reiterate a point, these patients are dedicated to you in that they do not want to cause you trouble.

## H & I Committee

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# Texas Delegates Report on AOA House

DAVID R. ARMBRUSTER, D.O.

Overview of

July, 1987 AOA House of Delegates

It was an extremely busy meeting with various new programs, which are of extreme importance to the entire AOA membership, initiated. It was a pleasure on Saturday evening, prior to the opening of the House on Sunday, for all delegates and guests to be invited to our new AOA building, located on East Ontario Street, just off Michigan Avenue. The building is very beautiful and the reception was extremely nice. The AOA now owns this brand new 18-story building, which has 130,000 square feet and a prestigious address. The building is very visible with its beautiful AOA logo on the top, which is lighted at night. The AOA presently occupies five floors, and in the future, will have the capacity to expand ultimately to utilize all 18 floors if necessary. Due to unexpired leases the expansion will take place as the need arises.

Of utmost importance was a resolution concerning the Research and Development Fund, which has been sorely needed by the American Osteopathic Association since the days of the AOA's incorporation. The resolved to Resolution 223, as amended on the floor of the House of Delegates, was that there will be an increase in annual dues for each member of the AOA in the amount of \$40 for a period of 10 years. The monies will be placed in a restricted, interest-bearing account, of which 90 percent of the interest earnings of this account may be utilized by the AOA Bureau of Research to support the development of qualified clinical investigators in osteopathic philosophy, principles and practice, and to support target research in osteopathic philosophies, principles and practice. The explanatory statement of this resolved is the goal that this resolution create \$5 million in an endowment fund in the next 10 years. This will be seed money, of which it is hoped that the AOA then can contact foundations and various charitable organizations for one-for-one or two-for-one or even higher funding for osteopathic research. Obviously, this will take two years to implement due to our protection in the constitution and bylaws of any changes with our basic constitution and bylaws.

Another important, extremely timely resolution creates a National Impaired Physicians Committee, which was referred to the Bureau of Finance and to the AOA president for immediate implementation. The Bureau of Finance did review this following the House and the committee will be set up by the president for a National Impaired Physicians Committee.

With regards to insurance issues, in order to continue alternative liability insurance for all AOA members, the AOA is setting up a captive insurance company which will offer professional liability insurance as a risk retention group nationwide. This was set up without any risk of capital on the AOA's part and should be implemented sometime before the end of 1987.

Also falling under insurance matters was the fact that the House endorsed the concept of catastrophic health insurance

and is encouraging the federal government and the private insurance sector to provide insurance for long-term care catastrophic illness.

The AOA Task Force on AIDS is also set up and implemented, as the problem of AIDS is not only a nationwide problem but a worldwide problem. The osteopathic community will be very instrumental with and through its Task Force on AIDS.

There were numerous other important topics that were discussed and approved by the House of Delegates, the governing body of the American Osteopathic Association. I would like to point out to the membership of TOMA that the American Osteopathic Association Board and the House of Delegates are representing you in the manner which protects your birthright, and are also trying to carry out the responsibilities as requested by its membership. Please, as members of AOA and TOMA, don't hesitate to contact any of your representatives.

Thank you for allowing me to serve as the AOA Board of Trustees representative from Texas as well as the House of Delegates representative from Texas.

JEROME L. ARMBRUSTER, D.O.

Report on

Ad Hoc Committee

As always, it was a pleasure to serve as a Texas delegate to the AOA House. My report on several resolutions is as follows:

**Resolution 239** — *Continued Support of Professional Mutual Insurance Company Risk Retention Group, submitted by the Ohio Osteopathic Association*

This resolution called for the AOA to commend the management of PMIC and Lewis Crist, director of the Missouri Department of Insurance, for achievements in rehabilitating the company and concern for past and current policyholders, and further resolved that the AOA recognize PMIC-RRG as a viable independent insurance company operating on the behalf of the osteopathic profession.

The resolution was disapproved, however, a substitute resolution was adopted which resolved, that the American Osteo-



Professional  
Pathology  
Services

George E. Miller, D.O., F.A.O.C.P.  
Richard R. Keene, M.D., F.C.A.P.

P.O. Box 64682 Dallas, Texas 75206

pathic Association's President communicate to the Director of the Missouri Department of Insurance, in the strongest possible terms, that the Professional Mutual Insurance Company should be continued in rehabilitation.

**SUBSTITUTE RESOLUTION PASSED**

**Resolution 242** — *Forming an AOA Captive Insurance Company; submitted by the Board of Trustees*

PASSED

This resolution recommended that the AOA form a captive insurance company offering insurance to the profession as a risk retention group.

The resolution was amended to finally read that the AOA endorse the creation of a Captive Insurance Company offering Professional Liability insurance to the profession as a Risk Retention Group.

PASSED AS AMENDED

**Resolution 243** — *Rogers-Atkins Insurance Agency/American Citadel Insurance Company/RRG; submitted by the Board of Trustees*

PASSED

The resolution dealt with the AOA forming a captive insurance company/RRG pursuant to the written proposal submitted by Rogers-Atkins Insurance Agency/American Citadel Insurance Company.

This resolution was amended to finally read that the AOA proceed to endorse the creation of a Captive Insurance Company/RRG generally pursuant to the written proposal submitted by Rogers-Atkins Insurance Agency.

PASSED AS AMENDED

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**FRANK J. BRADLEY, D.O.**  
**Report on**  
**Committee on Public Affairs**

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It was again my privilege to serve as one of your representatives to the House of Delegates of the American Osteopathic Association, and also to serve on the committee on public affairs.

Thirteen resolutions came before this committee and were discussed, and the following actions were taken:

**Resolution 207** — *Medicare and Medicaid Abuse; submitted by the Board of Trustees*

PASSED

This resolution reaffirmed the American Osteopathic Association's continued cooperation and support of the Federal government and states to stop abuse and fraud of Medicare and Medicaid.

PASSED

**Resolution 210** — *Reimbursement Formulas for Medicare, Medicaid and General Relief Patients; submitted by the Board of Trustees*

This resolution also was accepted by the House at the American Osteopathic Association and calls upon the Congress of the

United States, if an equitable adjustment in payments cannot be provided because of the current economic climate, to provide some other financial incentive to enhance the willingness on the part of the physician to accept Medicare assignments or accept Medicaid or general relief patients. It further resolved that the AOA promulgate this position among members of the United States Congress and members of the various states' legislatures.

**Resolution 218** — *Dispensing of Prescription Drugs By Physicians; submitted by the Council on Federal Health Programs*

The House also adopted this resolution, which in the final resolve, stated that the AOA opposes any attempt by Congress, the Federal Government or state governments to restrict, prohibit, or otherwise impede the prerogative of physicians to prescribe and dispense appropriate therapies to their patients.

**Resolution 227** — *Equal Reimbursement for Equal Service; submitted by the Missouri Association of Osteopathic Physicians and Surgeons*

The AOA House voted to refer this resolution, which had to do with reimbursement of physicians for service by a tier mechanism, to the AOA Council on Federal Health Programs for further study. This dealt with the various levels of payment given to rural physicians as compared with urban physicians. The resolution and thought behind it suggests that some equitable type of reimbursement be explored.

ADOPTED TO REFER

**Resolution 230** — *Medicare and Medicaid Funding Reduction; submitted by the New Jersey Association of Osteopathic Physicians and Surgeons*

This resolution resolved that the AOA opposes any proposed reduction in federal funding for Medicare and Medicaid.

PASSED

**Resolution 234** — *Airline Safety; submitted by the Pennsylvania Osteopathic Medical Association*

This resolution resolved that physicians be protected by the Good Samaritan Act when rendering help on airlines.

DISAPPROVED

Explanatory Statement: The concerns addressed in this resolution are currently in the existing AOA policy.

A final resolution which was submitted by the committee itself was one involving acquired immune deficiency syndrome (AIDS). Final resolve was that the established AOA Task Force on AIDS review the overall impact on currently proposed AIDS programs, study the long-term social and financial impact of the disease, and recommend a "practical national approach" for extreme management and treatment of AIDS



to report to the AOA House of Delegates at the July 1988 meeting.

This concludes my report on the Public Affairs Committee. Again, it was a most successful House of Delegates meeting with the highlight being the tour of the new AOA building, of which we all should be very proud.

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**GERALD P. FLANAGAN, D.O.**  
Report on  
Joint/House Budget Review Committee

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The meeting of the Board/House Budget Review Committee took place on July 27, 1987, at which time the 1987-88 budget was reviewed extensively. The total proposed budget is \$5,246,539. This was approved by the House of Delegates.

The committee submitted a resolution resolving for an additional \$15,000 in order to provide for the services of a Counsel for Medical Economic Affairs. This was passed by the House.

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**WILLIAM R. JENKINS, D.O.**  
Report on  
Committee on Professional Affairs

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This report is made for Drs. William R. Jenkins, Robert G. Maul and John J. Cegelski, Jr. Dr. Jenkins was on the Committee for Professional Affairs in the House of Delegates and Drs. Maul and Cegelski monitored this committee on behalf of the Texas profession.

The following resolutions were considered by the Professional Affairs Committee and I will report the action finally taken by the House.

**Resolution 200** — *Request for Charter — Docare International, Inc.: submitted by the Board of Trustees*

This resolution was a request for a charter as an affiliate for Docare International.

PASSED

**Resolution 208** — *Osteopathic Licensing: submitted by the Board of Trustees*

This resolution encouraged all states to attempt to obtain licensing in their states via the National Board of Osteopathic Medical Examiners, Inc. This was a rewording of a previously approved resolution.

PASSED

**Resolution 209** — *Osteopathic Musculoskeletal Evaluation: submitted by the Board of Trustees*

This resolution was a policy statement which had first been presented in March of 1981 on osteopathic musculoskeletal evaluation and was presented for reapproval.

PASSED

**Resolution 212** — *Peer Review: submitted by the Board of Trustees*

This resolution was first presented in 1964 and was a policy statement up for reaffirmation which states that "voluntary hospital peer review process remains the most natural and appropriate vehicle through which to affect institutional peer review, and that under the peer review organization programs, that the review of osteopathic diagnosis and therapeutics be performed by osteopathic physicians."

PASSED

**Resolution 213** — *Physician Definition: submitted by the Board of Trustees*

This was a reaffirmation of a policy statement first presented in March of 1965. The resolution resolves, "that the American Osteopathic Association, for clarity and the promotion of the public health, endorses the position that only fully trained and licensed D.O.s and M.D.s be indentified as 'Physicians' ",

PASSED

**Resolution 216** — *American College of Utilization Review Physicians, Inc.: submitted by the Board of Trustees*

This resolution stated that "ACURP be awarded accreditation in Category 2 for Continuing Medical Education Programs."

PASSED

**Resolution 219** — *Right to Perform Procedures: submitted by the American College of General Practitioners in Osteopathic Medicine and Surgery*

This resolution dealt with the department of general practice and institutions being able to approve various privileges for the members of that department. The resolution was referred to a committee of the AOA for review and it is to be reported back to the House of Delegates in July, 1988.

ADOPTED TO REFER

**Resolution 220** — *Specialty College Representation as Voting Members in the AOA House of Delegates: submitted by the American College of Osteopathic Obstetricians and Gynecologists*

This resolution requested that a representative from each recognized specialty college be seated as a voting member of the AOA House of Delegates.

DISAPPROVED

Explanatory Statement: This was disapproved because it was felt that the specialty colleges were represented by their state organizations, and that members of the specialty colleges were on all delegations.

**Resolution 221** — *Specialty College Representation as Voting Members in the AOA House of Delegates: submitted by the American Osteopathic College of Pathologists*

DISAPPROVED

Explanatory Statement: This resolution is a duplicate of resolution 220.

**Resolution 222** — *Additional Osteopathic Medical Schools in California: submitted by Osteopathic Physicians and Surgeons of California*

This resolution requested that the House of Delegates go on record as disapproving any new medical schools in the State of California.

DISAPPROVED

Explanatory Statement: This policy would jeopardize the AOA's status as the accreditation agency recognized by the U.S. Office of Education.

**Resolution 223** — *Research Development Fund: submitted by the Georgia Osteopathic Medical Association*

This resolution called for a \$25 assessment on each member to support osteopathic research. A substitute resolution was passed which was presented by the Board of Trustees.

The resolution ended with, "Resolved, that an increase in the annual dues of each member of the AOA in the amount of \$40 for a period of ten years, which shall be dedicated to the furtherance of research in this profession be approved. The monies are to be utilized as follows:

1. Annually \$40 of collected dues for all regular members shall be placed in a restricted, interest bearing account.
2. Ninety (90) percent of the interest earnings from this account may be utilized. The remainder of the interest accrues to the corpus of the fund.
3. The available earnings shall be utilized by the AOA Bureau of Research to:

- A. Support the development of qualified clinical investigators in osteopathic philosophy, principles and practice, and
- B. Support targeted research on osteopathic philosophy, principles and practice, and be it further Resolved, that present funding for the Bureau of Research be maintained.

SUBSTITUTE RESOLUTION ADOPTED AS AMENDED

Explanatory Statement: The goal of this resolution is to create a \$5 million endowment fund in 10 years. Interest only from this fund will be used to fund activities within the osteopathic profession.

**Resolution 224** — *Department of Osteopathic Medicine/Colleges of Osteopathic Medicine: submitted by Illinois Association of Osteopathic Physicians and Surgeons*

This resolution resolved that each accredited college of

osteopathic medicine in the United States of America have an active Department of Osteopathic Medicine to assure instruction in osteopathic healthcare, and this information be included in the Procedures for Colleges of Osteopathic Medicine Part II Basic Standards.

PASSED

**Resolution 226** — *CME Hours Approved by AOA Specialty Colleges: submitted by the Missouri Association of Osteopathic Physicians and Surgeons*

This resolution requested that the AOA break down all CME courses into specialty categories and require the specialty colleges to approve them as CME hours.

DISAPPROVED

Explanatory Statement: The AOA does not accredit CME hours for specialty colleges.

**Resolution 228** — *National Impaired Physician Committee: submitted by the Missouri Association of Osteopathic Physicians and Surgeons*

This resolution would form a committee for impaired physicians nationally, to help those states who have no impaired physicians committee.

ADOPTED TO REFER

Explanatory Statement: This resolution was referred to the Bureau of Finance because of the financial implications of the committee prior to its appointment.

**Resolution 231** — *Rehabilitation/Recreation Centers: submitted by the New Jersey Association of Osteopathic Physicians and Surgeons*

This resolution dealt with the endorsement of measures to increase the number of rehabilitation/recreation centers for the elderly in areas of determined need.

DISAPPROVED

Explanatory Statement: There is existing AOA policy which covers health care for the elderly.

**Resolution 235** — *Postdoctoral Training: submitted by the Pennsylvania Osteopathic Medical Association*

This resolution dealt with the approval of internships in various states that are in conflict with the interests of osteopathic hospitals within that state.

This resolution was passed, resolving that applications for osteopathic internship training be forwarded to the Board of the Divisional Society for input.

PASSED AS AMENDED

**Resolution 236** — *Student Osteopathic Medical Association (SOMA) Research and Development Program: submitted by the Student Osteopathic Medical Association*

This resolution was in support of the concept of the Research and Development Program of the Student Osteopathic Medical Association.

This resolution was referred to the Bureau of Research of the AOA for further review.

ADOPTED TO REFER

**Resolution 237** — *Student Osteopathic Medical Association — Rural Medicine Program Affiliation: submitted by the Student Osteopathic Medical Association*

This resolution resolved that the American Osteopathic Association supports an affiliation with the Rural Medicine Program of the Student Osteopathic Medical Association.

ADOPTED TO REFER

**Resolution 238** — *Quality Health Care: submitted by the Ohio Osteopathic Association*

DISAPPROVED

Explanatory Statement: The Reference Committee agrees in principle, however, each state law varies and it would be difficult to implement nationally.

**Resolution 240** — *Horizons for Osteopathic Medicine — Funds for Osteopathic Research: submitted by the Massachusetts Osteopathic Society*

This resolution requested that the AOA participate in the marketing of a rowing machine for a percentage of sales to the osteopathic profession.

DISAPPROVED

Explanatory Statement: The AOA appreciates all efforts to support research projects, however, it has a long standing policy of not endorsing products.

**Resolution 247** — *Physician Privilege: submitted by the Maine Osteopathic Association*

This resolution resolved that the American Osteopathic Association stand out in support of protecting physician privileges against those that might withhold privileges or abrogate them in any way; and it further resolved, that the AOA favors preventing those allied health professionals from performing as independent practitioners diagnosing and initiating therapy.

This resolution was referred to the Committee on Health Related Policies to report to the House of Delegates in July, 1988.

ADOPTED TO REFER

It was felt by your delegates that the House addressed many topics through various reference committees and that the business of the association was carried on by the House very expeditiously, and with the interests of the entire profession in mind.

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**ROYCE K. KEILERS, D.O.**  
Report on  
Ad Hoc Committee

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It was my pleasure to serve as vice chairman of the Ad Hoc Committee. This committee extensively took comments and reported on the insurance questions before it. My report on the following two resolutions is submitted:

**Resolution 229** — *Anatomical Gifts: submitted by New Jersey Association of Osteopathic Physicians and Surgeons*

This resolution resolved, that the American Osteopathic Association does herewith urge passage by the states of legislation encouraging hospital personnel to inform decedent's next of kin of the option to make anatomical gifts.

PASSED

**Resolution 232** — *Substance Abuse Education: submitted by New Jersey Association of Osteopathic Physicians and Surgeons*

This resolution resolved, that the American Osteopathic Association does herewith urge institution of substance abuse education at the appropriate primary school grade level.

PASSED

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**JAMES W. LIVELY, D.O.**  
Report on  
Constitution and Bylaws

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The Committee on Constitution and Bylaws considered two amendments which were adopted by the AOA in the meeting of the House of Delegates. The amended sections are included for your review.

**Article III — Dues and Assessments**  
**Section 2 — Dues Rate**

**d. Resident Rate.** Dues for regular members serving in residency training programs shall be twenty dollars (\$20.00) per year. One fiscal year at the residency rate of dues is to be allowed for each year of residency.

Explanatory Statement: This amendment permits D.O.'s in unapproved residencies to obtain reduced residency rate dues. This will affect a minimum number of residents, as currently 90 percent of non-osteopathic residency training programs re-

ceive approval prior to the resident completing the program.

## Article II — Membership

### Section 2 — Membership Requirements

f. **Honorary Member.** By specific action of the Board of Trustees, Honorary Membership may be granted to individuals, not eligible for any other category of membership, who support the goals and objectives of this association. Such honorary members shall not be required to pay dues or assessments. They shall receive complimentary copies of the association's publications and such other services as authorized by the Board of Trustees.

Honorary members shall not be eligible to membership in the House of Delegates or the Board of Trustees, or hold any elective offices of this association. Special listing in the Yearbook and Directory shall be provided.

Such membership, when conferred, shall remain in full force and effect unless revoked by action of the Board of Trustees of the American Osteopathic Association.

Explanatory Statement: This is a new membership classification which permits the association to honor individuals not eligible for other categories of membership. It is similar to the TOMA Honorary Membership classification.

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**DONALD M. PETERSON, D.O.**  
**Report on**  
**Committee on Public Affairs**

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It was again a pleasure for me to represent the TOMA membership at the recent meeting of the AOA House at the Marriott Hotel in Chicago. Robert L. Peters, Jr., D.O., an alternate delegate, helped to monitor proceedings for the TOMA membership.

The following are resolutions discussed in the Department of Public Affairs and the conclusions and determinations from the reference committee and the House.

#### **Resolution 201 — Prescription Drug Samples: submitted by the Board of Trustees**

This resolution had to do with drug samples being given to individual physicians in the office setting.

It was resolved, that the American Osteopathic Association supports the development of effective record-keeping requirements and procedures by *The Pharmaceutical Manufacturers* for distribution to physicians of prescription drug samples and that the American Osteopathic Association supports the enactment of appropriate criminal penalties for those who illegally divert such samples.

PASSED

#### **Resolution 202 — Catastrophic Health Insurance: submitted by the Board of Trustees**

This resolution resolved that the AOA endorse a plan comprised of the following elements to make catastrophic health insurance available to the American people:

1. An annual limit on Medicare beneficiaries out-of-pocket expenses, to be financed by a modest, added monthly premium for those who wish to participate;

2. Encouragement, through tax incentives, of individual medical accounts (IMA's) to foster savings for long-term care expenses;
3. The encouragement by the federal government of the private sector to *provide insurance* for long-term care;
4. The provision of optional long-term care insurance benefits under the Federal Employees Health Benefits Program; and
5. The establishment of a jointly-sponsored public/private program to educate the American public about options available for financing long-term care, as well as the limits of coverage for such services under existing programs.

PASSED

#### **Resolution 203 — Military Medical Readiness: submitted by the Board of Trustees**

This resolution resolved that the AOA supports those efforts of the Defense Department that encourage the voluntary participation of physicians in the military.

PASSED

#### **Resolution 204 — Abused Persons: submitted by the Board of Trustees**

This resolution resolved that the AOA continue to encourage public health agencies to provide special training in: advocacy for abused persons; effective assessment and intervention techniques to assist those in abused situations; legal procedures; special needs of young and elderly; and building links with local shelters and related community resources.

PASSED

#### **Resolution 205 — Due Process in Agency Determinations: submitted by the Board of Trustees**

This resolution resolved that the AOA declare its opposition to any and all existing or proposed federal and state rules or procedures, and their underlying laws, which vest any administrative personality with final authority, in matters affecting the rights and/or property of individuals, where no provision is made for a prior, fair, formal hearing.

PASSED

#### **Resolution 206 — Hospice Care Programs: submitted by the Board of Trustees**

This resolution resolved that the AOA continue to encourage its membership to participate in the hospice care program and attend educational programs on the hospice care concept; and further resolved that the AOA strongly urge the Congress of the United States to continue to include hospice care as a benefit under medicare and medicaid; and that it strongly urge the health insurance industry to include hospice care as a benefit.

PASSED



**BILL H. PURYEAR, D.O.**  
Report on  
Ad Hoc Committee

It was most interesting to sit in on the proceedings, as first alternate delegate, of the Ad Hoc Committee. The following are several resolutions of interest:

**Resolution 244** — *Development of the AOA Captive Insurance Company/RRG: submitted by the Board of Trustees*

This resolution resolved, that the Bureau of Insurance be empowered to act for the Board of Trustees in the development of the Captive Insurance Company/RRG.

The resolution was amended to finally read that the Bureau of Insurance be *preliminarily* empowered to act for the Board of Trustees (*subject to ultimate board ratification*) in facilitating the creation of a Captive Insurance Company/RRG.

PASSED AS AMENDED

**Resolution 245** — *Protection of AOA Assets: submitted by the Board of Trustees*

This resolution dealt with protecting AOA assets when the formation of a captive insurance company was accomplished.

It was amended to finally read that the AOA Executive Director and General Counsel be directed to insure that *activities toward addressing creation of a captive insurance company and ultimate structuring of such a company are accomplished in a manner which will protect the assets of the American Osteopathic Association.*

PASSED AS AMENDED

**Resolution 248** — *Anti-Discrimination: submitted by Maine Osteopathic Association*

This resolution dealt with the increasing patient involvement in prepaid medical care plans, resulting in incidences of discrimination, and urged the AOA to go on record against such discrimination.

The resolution was amended slightly to finally resolve, that the AOA be on record and support all means of assuring osteopathic participation in such plans or patient ability to obtain equally available osteopathic care.

PASSED AS AMENDED

S/D CAROLINE E. WOODLAND  
Report on  
Ad Hoc Committee

**Resolution 211** — *Violence on Television: submitted by the Board of Trustees*

This resolution is an amendment to AOA policy adopted in July, 1982, on *Violence on Television*. The resolution states that the American Osteopathic Association opposes the pre-

sentation of excessive violence on television.

PASSED

**Resolution 214** — *Primary Health Care: submitted by the Committee on Health Related Policies*

This resolution deletes policy adopted in 1982 by the AOA House of Delegates on *Primary Health Care*. The resolution was originally drawn as a special purpose document. Other existing policy statements provide a definition for primary care, as well as a description of osteopathic general practice.

PASSED

**Resolution 215** — *Standard of Care: submitted by the Committee on Health Related Policies*

This resolution was given editorial correction since it was adopted in July, 1986. The resolution reads that the American Osteopathic Association supports the highest quality of health care for all patients. Furthermore, the AOA urges the Federal and state governments to prevent the deterioration of the quality of health care, and urges the osteopathic medical profession to develop standards for appropriate care for all patients.

PASSED AS AMENDED

**Resolution 217** — *Alternative Health Care Delivery Systems: submitted by the Bureau of Public Education on Health*

This resolution states that the American Osteopathic Association continues to have as a high priority the education of osteopathic physicians and the general public as to the importance of continued availability of osteopathic services in the health care delivery system.

PASSED

Explanatory Statement: Existing AOA committees are addressing the issues raised by this statement. It is the intent of the resolution that existing efforts regarding the role of osteopathic medicine and alternative delivery systems be increased.

**TOMA**  
**PUBLIC HEALTH SEMINAR/**  
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## Primary Care Update IV

Friday, Saturday, Sunday  
September 25, 26, 27, 1987

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Kiva Room — TCOM  
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Fort Worth, Texas

### TOPICS

**Geriatrics** — *Drug-Induced Mental Changes; Chronic Pain; Alzheimer's Dementia*

**Hematology/Oncology** — *Anemia in the Elderly; Following the Patient with Previous Cancer after the Mastectomy*

**Rheumatology** — *Juvenile Rheumatoid Arthritis; Therapy of Rheumatoid Arthritis; Diagnosis and Treatment of Ankylosing Spondylitis*

**Pulmonary** — *Treatment of Asthma; Diagnosis and Treatment of Community Acquired Pneumonia; COPD Overview*

**Infectious Diseases** — *Rapid Diagnostic Tests in Infectious Diseases; Chlamydia and Its Expanding Clinical Spectrum; Chronic Mononucleosis — Is it a Common Disease?*

**Hypertension** — *The Neurological Approach to Hypertension; The Nephrological Approach to Hypertension; The Cardiovascular Approach to Hypertension*

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# Texas ACGP Update

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

The Texas State Society of the American College of General Practitioners in Osteopathic Medicine and Surgery (ACGPOMS) held its Fourteenth Mid-year Clinical Seminar/Symposium at the Arlington Hilton in Arlington, Texas, July 31 through August 2, 1987. Special guests included Ray E. Piper, D.O., ACGPOMS President; Bill H. Puryear, D.O., TOMA President; and Mr. Tom Hanstrom, TOMA Executive Director.

The program chairman was Nelda Cunniff, D.O., who put together an excellent CME program, the theme of which was "Emphasis On Caring". The turnout was outstanding, with 170 registrants.

Election of Texas ACGP officers for 1987-88 took place during the annual session and they are as follows: Constance I. Jenkins, D.O., President; Nelda Cunniff, D.O., President-Elect; T. R. Sharp, D.O., Secretary-Treasurer; R. Greg Maul, D.O., Immediate Past President; and Richard M. Hall, D.O., Vice President.

There were three Texas ACGP Presidential appointments: Eugene Zachary, D.O., Parliamentarian (ex-officio); Robert Maul, D.O., Liaison to ACGPOMS (ex-officio); and Joseph Montgomery-Davis, D.O., Editor (ex-officio).

The six full-voting Texas ACGP Trustees currently are: M. Lee Shriner, D.O.; Leland B. Nelson, D.O.; Rodney Wiseman, D.O.; Craig Whiting, D.O.; Howard Galarneau, D.O.; and Jim W. Czewski, D.O., who was elected at this annual session.

The two non-voting Texas ACGP Trustees are: L.L. Bunnell, D.O., TCOM Observer (ex-officio) and S/D David E. Garza, Zeta Chapter Representative (ex-officio).

Other business conducted during the annual session on August 1

involved the election of Texas ACGP members to the 10 standing committees of the Texas ACGP, as well as Texas delegates to the ACGPOMS Congress of Delegates to be held February 7-14, 1988 at the Wyndham Hotel in Palm Springs, California.

The PACER Committee of the Texas ACGP held a long-range planning meeting on August 1. Those past presidents of the Texas ACGP in attendance were: John H. Burnett, D.O.; Mary M. Burnett, D.O.; Robert B. Finch, D.O.; Donald M. Peterson, D.O.; Robert L. Peters, D.O.; Phillip Saperstein, D.O.; R. Greg Maul, D.O.; T.R. Sharp, D.O.; T. Eugene Zachary, D.O.; Joseph L. Love, D.O.; Royce K. Keilers, D.O.; Richard W. Anderson, D.O.; and Joseph Montgomery-Davis, D.O. A special guest, Ray E. Piper, D.O., was also present at this PACER meeting.

There was some confusion pertaining to the ACGPOMS mandatory attendance requirement in order to be a member in "good standing". A clarification of this requirement was sought and is printed correctly as follows: "In order to maintain their membership in the ACGP, active members must register and attend at least one educational program sponsored by the ACGP each three years." Texas ACGP members will be kept informed of news and events through monthly updates in the *Texas DO*.

In closing, don't forget that the ACGPOMS will meet in conjunction with the AOA in Orlando, Florida, October 4-8, 1987. The Peabody Orlando is the headquarter hotel for the ACGPOMS. Texas members of the ACGPOMS are encouraged to register and get their hotel reservations in early. A

# IN MEMORIAM

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## E. W. Cain, D.O.

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E. W. Cain, D.O., of Amarillo, passed away July 26 at the age of 83. Services were held July 29 at Polk Street United Methodist Church with burial in Llano Cemetery.

A TOMA member since the early 1940's, Dr. Cain received his D.O. degree from Kirksville College of Osteopathic Medicine in 1937 and practiced in Amarillo until his retirement in the late 1970's.

He was a TOMA life member and had served on the TOMA House of Delegates. Dr. Cain was a member of TOMA District I and had served as president of District I. He was former chief-of-staff at Southwest Osteopathic Hospital in Amarillo and, in 1982, was one of four retired osteopathic physicians honored by the hospital at a luncheon for "their significant contributions to the practice of medicine in Amarillo and the surrounding area."

Dr. Cain was also a life member of the American Osteopathic Association.

Non-professional memberships included member and past exalted ruler of the Elks Club; member of Amarillo Lions Club; Masonic Lodge No. 731; Amarillo Commandery, Khiva Temple of the Shrine;

and Polk Street United Methodist Church.

Community services throughout the years included serving as ring-side physician for the Golden Glove Boxing Tournaments; team physician for both football and basketball in the high school system; and serving on the board of the Bivens Convalescent Home, a charitable institution.

Survivors include his wife; a son, John Robert of Oklahoma City; a daughter, Patsy Warnick of Lubbock; and five granddaughters.

The family requests memorials be made to the Polk Street United Methodist Church renovation fund or favorite charity.

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## Donald L. Eakin, D.O.

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Donald L. Eakin, D.O., of Austin passed away July 28 at the age of 61. He was retired at the time of his death. Memorial services were held August 1 at Greenwood Funeral Home Chapel in Fort Worth.

A TOMA member since 1954, Dr. Eakin was a 1953 graduate of Kansas City College of Osteopathy and Surgery. He served his internship at Amarillo Osteopathic Hospital and took an internal medicine residency at Kansas City Osteopathic Hospital. Throughout his profes-

sional career, Dr. Eakin had practiced in Fort Worth, Port Neches, Groves, Amarillo, Oklahoma City and in Waco, where in 1980, he was staff physician for the Texas Veterans Administration Medical Center.

In 1981, Dr. Eakin was appointed to the State Hypertension Advisory Committee, representing TOMA. The purpose of the committee was to advise the Texas Department of Health in the planning and coordination of the department's hypertension program.

He was a member of TOMA District VII and the American Osteopathic Association. Non-professional memberships included the United Methodist Temple in Port Arthur; a 32nd degree Mason, holding memberships in lodges in both Waco and Port Arthur; Karem Shrine in Waco; American Rose Society and several other local rose societies.

Survivors include his wife, Shirley, of Austin; three sons, Dr. Daryl Eakin of Austin, Dr. David Eakin of Fort Worth, and Dr. Jeffery Eakin of Houston; his mother, Anna Marie Eakin of Greensburg, Kansas; one sister, Betty Ann White of St. Charles, Illinois; and four grandsons.

The family requests that memorials be made to the Shriner's Burn Institute in Galveston.▲

## Texas Health Department Receives Grant for AZT

The Texas Health Department will receive monetary assistance from the federal government, in the form of a \$1.8 million grant, in order to purchase aziothymidine (AZT) for low-income patients suffering from AIDS.

AZT is currently the only drug approved by the U.S. Food and Drug Administration for treatment

of the virus that causes AIDS, and has been proven effective in prolonging the lives of some AIDS sufferers. Unfortunately, the drug is extremely expensive, ranging from \$8,000 to \$10,000 per patient annually.

Texas rates number four in the largest number of AIDS cases in

the United States, with New York, California and New Jersey as the top three.

Patients wishing AZT therapy will have to meet certain financial and medical standards which will be published shortly. Those patients wishing to obtain financial guidelines can call 1-800-255-1090.▲

# New York Physicians May Have to Prove Competency

Precipitated by ever-increasing liability insurance premiums as well as litigation, New York Governor Mario Cuomo and a special panel are proposing mandatory periodic reviews of physicians' competency, according to an article in *American Medical News*. If this comes to pass, New York will become the first state to require recredentialing of physicians. Currently, California, Michigan and Massachusetts are pondering similar proposals.

The panel is composed of medical officials, as well as administrators, of national organizations. The panel will be forwarding their findings this fall to the state Board of Regents, responsible for education and licensure of physicians, as well as health department officials.

As quoted in the article, Alfred Gellhorn, M.D., special medical adviser in the New York State Health Department and co-chairman of the committee, said, "Just because one obtains a license to practice medicine based on appropriate training doesn't mean that one maintains that competency for a lifetime."

The committee is proposing that for physicians with staff privileges, hospital review systems that require administrators to accredit physicians, would be utilized. If instituted statewide, hospital officials would be asked to certify that they had reviewed their physicians' competency. At this point, physicians would submit a copy of the review

to the state when applying for relicensure.

For physicians with no staff privileges, the committee is studying various methods such as office audit systems or computer based testing.

Officials of the Federation of State Medical Boards (FSMB) are opposed to a "blanket examination as a requisite for relicensure." Bryant Galusha, M.D., executive vice president of FSMB, feels that a test might be warranted if individual physicians are specifically deficient in cognitive skills. However, he added that, "... to give an all-encompassing exam would be an administrative nightmare that is totally unwarranted."▲

## A Necessary Evil

A record \$5.7 billion tax increase has been passed in an effort to produce new revenue over the next biennium to help balance the State of Texas' checkbook.

Lawmakers are already saying that the tax bill is not the final solution to the states' fiscal crisis and economists are crying that the money will run out again before two years. State Comptroller Bob Bullock believes that a politically acceptable panacea would be to broaden the sales tax base to include all professional services, except those provided by physicians.

As it now stands, the "quick fix" is essentially increasing taxes that already exist, such as the gasoline tax, set to drop to 10 cents a gallon on September 1, will now remain at 15 cents. The state sales tax will be boosted to six percent on October 1. Big businesses will be hit the hardest due to an increase in the franchise tax, which has been upped to \$6.70 per \$1,000 of capital, effective January 1. What this will mean to consumers in such areas as utilities remains to be seen. A variety of other services will now be taxed, most to begin on September 1.

News for professionals is an annual \$110 professional fee, or "occupational tax", effective September 1.

This will affect physicians, dentists, optometrists, chiropractors, psychologists, certified public accountants, architects, licensed engineers, licensed securities dealers and veterinarians. A similar fee is to be imposed on attorneys as of January 1. The professional fee tax is set to expire after two years. It should be noted that an annual fee would be preferable to having all services provided by professionals taxed, however, those affected might be wise not to hold their breath two years from now when the "occupational tax" supposedly will expire. Just remember the "temporary" gasoline tax.

With legislators saying they did the best they could, considering what they had to work with, and Texans fearful of being "nickle-and-dimed" to death, a move made by the Legislature was the creation of the Select Committee on Tax Equity, who will study any and all options for taxation in Texas. The committee will be reporting to the 1989 Legislature and there is a possibility that for the first time since 1961, when the state's general sales tax was approved, the entire tax structure for Texas may be overhauled.

# HCFA Awards TMF 16-month Contract

The Texas Medical Foundation (TMF), the Medicare peer review organization of Texas, has announced its newly elected officers and the appointment of a consumer representative to its Board of Trustees.

John M. Smith, Jr., M.D., a San Antonio family practitioner, has been elected to his third one-year term as TMF president.

TOMA member Donald M. Peterson, D.O., has been re-elected TMF vice-president. Dr. Peterson is in private practice of family medicine and serves as professor at Texas College of Osteopathic Medicine.

Drue O. D. Ware, M.D., a Fort Worth general practitioner, has been elected new TMF secretary, succeeding Sam N. Key, Jr., M.D., of Austin.

Marshall Dougherty, M.D., a pathologist in Paris, has been re-elected to his second term as TMF treasurer.

Mr. Jack Danley of El Paso has been appointed the first consumer representative to the TMF Board of Trustees, in an effort to facilitate consumer awareness

of medical peer review activity. Mr. Danley was named to the position based on his years of service as an advocate for the senior citizens of Texas. He is currently a representative to the Texas Silver-Haired Legislature and has served in volunteer leadership positions for the American Association of Retired Persons.

TMF officials have also announced that the organization has been awarded a contract to review the quality of health care provided to Medicare beneficiaries enrolled in eight risk-sharing health maintenance organizations in Texas. The 16-month contract, to run from June 1, 1987 to September 30, 1988, was awarded by the Health Care Financing Administration, the federal agency that oversees the Medicare program.

TMF will review the care provided in ambulatory and other outpatient health settings, as well as in the hospital, and the medical review will be conducted by TMF physician reviewers who also have an affiliation with a health maintenance organization in Texas.

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# ATOMA News

By Liz Cobb  
ATOMA President-Elect  
and Membership Chairperson

## Are You a Member of the Team that Counts?

Membership-Webster tells us this is: "the state or status of being a member; the body of members; the relation between a member of a class and the class." Sounds good.

To me being able to say I am a member of ATOMA means much more. It means I care about what is going on in my husband's profession. It says I am a part of that profession with him. I am included in the team of TOMA and ATOMA.

It has come to my attention that maybe some Doctors' Spouses are a little hesitant about paying ATOMA dues because their spouse

will be called upon to perform a duty they don't have time for. NOT SO. The ATOMA is a "voluntary" NOT "draft" organization. We will not draft anyone into doing anything. Your spouse will not be put into services UNLESS he or she wants to be. All we want from you or your spouse is \$20.00. You're not required to attend meetings or serve on the board or hang from your teeth. All you are asked to do is pay your dues.

I may be silly about some things, but, when it comes to this I am

dead serious. Osteopathy is a very necessary part of all our lives. We are all team members. We need FULL participation from every team member. When you have half a team working the members get tired. When ALL team members pull their weight it's down hill all the way.

Try us, you might like us. We are here to help promote Osteopathy, and we really do need the support from EVERY Osteopath who has a father, husband, son, mother, wife, and/or daughter. Do It Today!

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# DEA Begins Three-Year Registrations

According to the January/June newsletter of the Texas State Board of Pharmacy, the Drug Enforcement Administration (DEA) began, as of July 1, 1987, a multi-year registration for retail pharmacies, hospitals/clinics, practitioners and teaching institutions. The aforementioned registrants comprise over 98 percent of active DEA registrants.

All new applicants for registration as a retail pharmacy, hospital/clinic, practitioner or teaching institution will be renewed for three years. The applicant will be assigned an expiration date, ranging from 28 to 39 months. Thus, "new" community and institutional pharmacies will be initially registered for three years and renewed every

three years thereafter.

Renewal registrations for hospitals/clinics will be phased into the three-year renewal system. All current registrants will be divided into three equal groups. As these registrants reach their expiration date, the registration will be renewed for one, two or three years, depending upon which group the registrant was assigned. Practitioners will also be phased into the three-year renewal system.

Unlike registrations for hospital/clinics and practitioners, retail pharmacies and teaching institutions will not be phased into the three-year renewal system. Beginning with registrations expiring on July 31, 1987, all retail pharmacies will be renewed for a three-year

period as the registration becomes due.

Renewal applications will be mailed to all registrants approximately 45 to 60 days prior to the registration expiration date. The correct renewal fee and expiration date will be printed on the renewal application. The renewal fee will be based on the yearly fee of \$20, thus, a two-year registration will be \$40 and the fee for a three-year registration will run \$60.

The three-year registration system does not apply to manufacturers, distributors, researchers, analytical labs, importers, exporters and narcotic treatment programs. These registrants will continue to register for a one-year period.▲

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# AAOS Honors TOMA Members

The American Association of Osteopathic Specialists (AAOS) reports that the following TOMA members were promoted or honored during the AAOS's 35th Annual Meeting in St. Louis, either by the AAOS directly or one of its affiliates. The physicians are:

George A. Fuller, III, D.O., of Pittsburg, was elected president of the AAOS Board of Directors; Gary H. Campbell, D.O., of Fort Worth, was elected vice president of the American Academy of Osteopathic

Internists and was certified in allergy and immunology by the AAOS Board of Certification in Internal Medicine; Bruce L. Ackerman, D.O., of Garland, was certified in pulmonology and elected to a 1987-90 term on the AAOS Board of Certification in Internal Medicine; James R. Tyler, D.O., of Fort Worth, was elected to a 1987-90 term on the AAOS Board of Certification in Surgery; Jon E. Botts, D.O., of Houston, was cer-

tified in anesthesiology by the AAOS Board of Certification in Anesthesiology; Agustin Acosta, D.O., of Mesquite, was certified in gastroenterology by the AAOS Board of Certification in Internal Medicine, and Randolph R. Gillum, D.O., also of Mesquite, was certified in general surgery by the AAOS Board of Certification in Surgery.

TOMA extends congratulations to all these physicians.▲

## Open Letter to TCOM Freshman Class

The Texas Osteopathic Medical Association (TOMA) congratulates members of the new TCOM freshman class upon their acceptance and applauds the upper classes for their continuing diligence.

We extend an invitation to any student, not currently a TOMA member, to join with us. TOMA membership is dues-free and an application can be obtained either from TCOM, or by writing, calling or dropping by the TOMA State Headquarters, 226 Bailey Avenue, phone 336-0549.

As a dues-free student member of TOMA, you will receive our monthly magazine, the *Texas DO*, which will keep you up-to-date on relevant developments in the profession in Texas and nationwide. You will also receive general mailings of interest to keep you informed of major events; be issued a personal membership card for identification purposes; be entitled to reduced rates at TOMA's annual conventions; be entitled to utilize group meeting facilities located in the TOMA State Headquarters at no charge; take advantage of study materials which TOMA has on hand for the Texas Medical Jurisprudence Exam; be invited to any seminars or meetings of general interest to TOMA members; receive assistance in choosing a practice location through TOMA's comprehensive placement service when you are ready to enter practice; and, be able to call on the TOMA staff for answers to any questions you may have about the osteopathic medical profession.

TOMA, founded in 1900, is the state association for Texas' osteopathic physicians, and as such, works in conjunction with TCOM in disseminating information to the public, as well as protecting the practice rights

of all osteopathic physicians in the state. Our main goal is to promote the art, science and philosophy of osteopathic medicine and to ensure that the public has a choice when selecting a physician for their health care needs. TOMA believes that the individual D.O., the entire osteopathic profession and patients' interests will best be served by our working together.

TOMA would like to establish a good, working relationship with all TCOM students in order to serve your needs while in school, as well as during your eventual entry into practice. We are here for YOU as well as for those already in practice. We hope you will take the initiative and become a student member so that we may better assist you now and in the future.

The TOMA State Headquarters is open Monday through Friday from 7:30 until 4:30. We invite you to drop by at any time for a tour and/or a discussion of how we can better serve your particular needs. We look forward to a long, mutually rewarding relationship.

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## A.G. Opinion on Referral Services

G. Valter Brindley, Jr., M.D., Texas State Board of Medical Examiners, has sought the Attorney General's opinion on the legality of a contract between a physician and a referral service.

In a letter to Dr. Brindley, Attorney General Jim Mattox states:

"A physician or surgeon may not employ or agree to employ, pay or promise to pay, or reward or promise to reward any person, firm, association of persons, partnership, or corporation for securing, soliciting, or drumming patients or patronage. A physician or surgeon may not accept or agree to accept any payment, fee, reward, or anything of value for securing, soliciting, or drumming for patients or patronage for any physician or surgeon. Whoever violates any provision of this section commits a Class A misdemeanor. Each payment, reward, or fee or agreement to pay or accept a reward or fee is a separate offense. The preceding shall not be construed to prohibit advertising except that which is false, misleading, or deceptive or that which advertises professional superiority or the performance of professional service in a superior manner and that is not readily subject to verification."

## Mandatory Assignment Approved in Rhode Island

Rhode Island has become the newest state to ban "balance billing" of Medicare patients, joining Vermont and Massachusetts. Although there had been avid interest in linking assignment to licensure, due to the Massachusetts law, the provision was dropped and the bill signed by Governor Edward DiPrete is a compromise between advocates and opponents of mandatory assignment.

The bill, which became effective July 1, affects Medicare recipients within certain income levels; individuals with incomes of \$12,000 or less are affected as are couples with combined incomes of \$15,000 or less. Incomes will be verified by the state's Department of Elderly Affairs.

Under the law, physicians must accept Medicare's reasonable charge, 80 percent of which will be paid to physicians directly, and 20 percent to be paid by patients, as total payment for services rendered.

Although the new law spells out no penalties, physicians who do not comply with the billing guidelines can be cited for unprofessional conduct under the medical practice act.

A 21-member panel has been created in order to resolve any disputes which might arise and additionally will, after a one-year trial period, make suggestions and/or recommendations to the state legislature.

## Medicaid Alert

Your attention is called to Medicaid Bulletin No. 57, dated July, 1987. On page five, under the heading "Billing Supply Codes In An Office Setting", some concern has surfaced as to whether this is newly implemented policy. The text reads, "Physician fees are calculated to include office overhead expense. Supplies billed by a physician in the office are therefore included in the office visit and cannot be billed separately."

To clarify the issue, TOMA Executive Director Tom Hanstrom contacted Robert K. Pendergrass, M.D., Vice President and Medical Director of National Heritage Insurance Company. Dr. Pendergrass stated that the purpose of the aforementioned article "...was a reminder to Texas providers of a previously established policy but not an announcement of a new policy." Furthermore, he noted "...that NHIC has been paying for certain items which were never reimbursable under existing policy." These inappropriate payments will be absorbed within the company, rather than implementing a massive search for recoupment.

In essence, because of the increasing amount of claims submitted with inappropriate fragmentation of services, "...it seemed prudent to provide a reminder to providers that supplies are not reimbursable in the physician's office or clinic under the Texas Medicaid Program even though such codes may be found in CPT-4 as well as HCFA Common Procedure Coding System," according to Dr. Pendergrass.

# Texas Supreme Court to Hear Arguments on Medical Malpractice Limits

The Texas Medical Association (TMA) reports that they are waiting on results of a ruling by the Texas Supreme Court with regards to medical malpractice limits. Non-medical liability damages in malpractice cases were set by the legislature in 1977 at \$500,000. However, inflation has driven the current cap to approximately \$916,000. Since that time, two state district courts have ruled the

law unconstitutional. Therefore, because of conflicting rulings from Texas courts, the TMA is seeking a ruling from the Court as to the constitutionality of the 1977 law.

The case has been set for October 7 at which time the Court will hear arguments. As quoted in the July/August issue of *TMA Action* newsletter, Kim Ross, TMA's public affairs director, said, "It is the Texas Supreme Court, not the legislature,

that has been determining the state's tort laws for the past 10 years."

The TMA has concerns that "... the cap will be thrown out because the court generally is pro-plaintiff." Because of this possibility, lawmakers have been informed that once the Texas Supreme Court rules on the constitutionality of existing law, TMA "reserves the right to seek legislation in a special session."▲

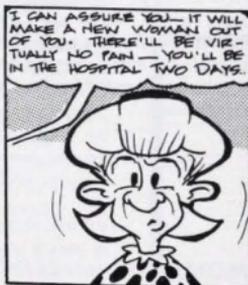
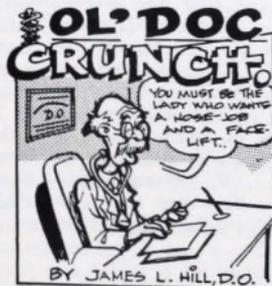
## TDHS to Survey Providers on Client Eligibility Inquiry System

The Texas Department of Human Services (TDHS) is proposing implementation of a telephone client eligibility inquiry system, which would be available to providers of Medicaid services to eligible clients. This information system would be designed to make practical information about Medicaid eligibility and Medicaid claims status easily available. The TDHS feels that a need exists for this type of system.

To that end, many of the contract providers, currently providing services to TDHS clients, will be receiving a survey from TDHS listing various types of systems, along with their advantages and disadvantages. The survey is intended to provide much needed feedback, from physicians, before a decision is made on which type of system would be more viable, or whether such a system is even needed.

Results derived from an analysis of survey responses will determine to a significant degree, the final decision made by the TDHS executive staff.

Since the survey specifically asks for physician input, TOMA feels it would be beneficial for those receiving this survey to complete it, add any pertinent comments, and return it to the TDHS as soon as possible.▲



# Free Physical Exams Offered September 12

CHECKUP FOR LIFE '87, a new and unique health-care concept, will be held Saturday, September 12 from 8 a.m. to noon. CHECKUP FOR LIFE provides free physical examinations by more than 60 area physicians in their offices at 40-plus locations in Fort Worth and surrounding areas. These checkups are available to anyone making an appointment. CHECKUP FOR LIFE will kick off National Osteopathic Medicine Week, and is sponsored by Fort Worth Osteopathic Medical Center, the *Fort Worth Star Telegram* and WFAA-TV Channel 8.

Recent studies conducted by Fort Worth Osteopathic Medical Center show that 34 percent of all patients admitted to the Medical Center's emergency room did not have a family physician. Routine physical exams can prevent or control many conditions that lead to serious illnesses and even death. Today, many conditions that were untreatable just a few years ago are now treated routinely in physicians' offices. CHECKUP FOR LIFE's purpose is to call attention to the need for everyone to be concerned about individual and family health.

The free screenings will include:

- 
- General Health Evaluation -
  - Hearing and Vision Tests -
  - Colo/rectal Screen -
  - Urinalysis -
  - Height/Weight Evaluation -
  - Blood Pressure Test -
- 

and at a reduced cost of only \$10, blood chemistry tests will be provided to evaluate 23 elements, including triglyceride, glucose and cholesterol levels. If a specific health problem is identified, the health fair physicians will refer CHECKUP FOR LIFE participants to specialists, providing the patient with a certificate for a free initial consultation.

There is no age restriction for participants, but space is limited and must be reserved. Participants need only to call 735-3372 for an appointment. Registrants will be provided with convenient office locations in their zip code areas they may visit September 12.▲

## COMP Offers New Course

Philip Pumerantz, Ph.D., president of the College of Osteopathic Medicine of the Pacific (COMP), Pomona, California, has introduced the study of literature and art into the school's curriculum to help "give a better human perspective to our physicians-in-training."

The course was introduced in an innovative effort to address concerns of medical educators that physicians are losing touch with the human side of caring for patients, as revolutionary technological advances threaten to obscure the more personal aspects of medicine. The 13-week elective course, "Literature and Medicine," seeks to teach medical students to understand the emotional, psychological and cultural underpinnings of human behavior, including the interweaving of mind and body in sickness and health.▲

## Wisconsin Chiropractors Gain Major Goal

The Wisconsin Association of Osteopathic Physicians and Surgeons has reported that a new state budget bill was signed into law by Governor Thompson. The governor used his partial veto to delete scores of special provisions added to the bill by members of the Legislature, however, a survivor of Thompson's veto pen was a requirement that health insurance policies and health maintenance organizations cover services of chiropractors. This has been a long-sought goal of the chiropractic lobby.

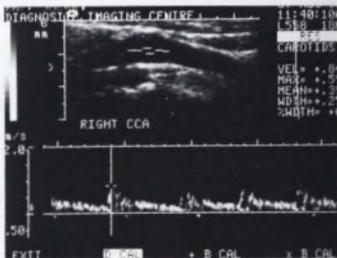
Physicians and small business organizations had urged the governor, unsuccessfully, to veto the requirements.▲

# You'll be surprised how fast you have the answer.

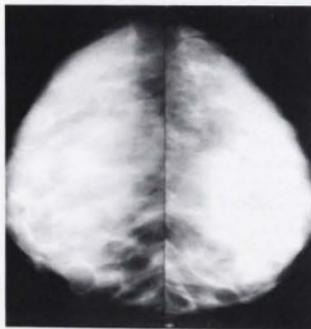


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# Physician Placement Service Available at TOMA

The TOMA Physician Placement Service is just one of the many services offered by TOMA. Many physicians may not be aware of the fact that position placement ads listed in the *Texas DO* are only a fraction of positions available. A detailed list of practice sites is also kept on the inhouse computer. This

comprehensive listing attempts to match the physician with the type of practice desired, and information on geographic location, population, nearby facilities, recreational facilities and even climate are also maintained. This service is for out-of-state physicians wishing to relocate

to Texas, as well as TOMA members desiring a practice location change.

Physicians wishing a listing of placement sites, in addition to those published in the *Texas DO*, should contact the TOMA Physician Placement Service at 1-800-772-5993. ^

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DATE: Tuesday, September 22, 1987  
Thursday, September 24, 1987  
TIME: 7:00 - 9:30 p.m.  
PLACE: TOMA State Headquarters Building  
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# Opportunities Unlimited

## PHYSICIANS WANTED

**AVAILABLE** — Practice Opportunity, equipment and professional building. 159' frontage by 100' deep, on main street and highway. Building 2,050 square feet, brick over cement block. Clinic 1,200 square feet plus 850 square feet rented. Two hospitals within 15 miles, two nursing homes in community. Only full-time physician in the community. Wide drawing area. Contact: T.P. Forrestal, D.O., 711 Main Street, Comanche, Oklahoma 73529; 405-439-2318 or 405-439-6642. (03)

**WHITESBORO** — Family practice associate wanted for Whitesboro Family Practice Center. Established practice. Guaranteed salary for first year. Contact: 214-564-3503. (09)

**GENERAL/FAMILY PRACTICE** — Live the good life in the beautiful hill country of Texas. Mason is a clean friendly town of 2,000 and is two hours from either Austin or San Antonio. Eight tournament quality lighted tennis courts as well as a nine hole golf course for play this fall. Office based general/family practice with surgical assist privileges available in two nearby hospitals. Female physicians encouraged to apply. Call Jim Pettit, D.O., 915-347-5926 anytime. (12)

**PHYSICIAN NEEDED** — for family practice minor emergency clinic. Modern well-equipped clinic in East Texas Lakes area. \$25.00 hourly, sleeping accommodations. Contact: Linda at 1-409-634-8343. (13)

**EXCELLENT TEXAS OPPORTUNITIES** — ENT, Family Practitioner, General Practitioner, General Surgeon, Internal Medicine, OB/Gyn, Ophthalmologist, Oncologist, Pediatrician, to practice in one of several lake area communities, in the beautiful Piney Woods area of East Texas. Enjoy boating, fishing, hunting year around. Excellent quality of life, first year guarantee, etc. Other Texas opportunities available also. Reply with C/V to, Medical Support Services, Armando L. Frezza, 11509 Quarter Horse Trail, Austin, 78750; 512-331-4164. (22)

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

**MINEOLA** — General/family practice physician needed to join existing practice in east Texas. Large clientele. Opportunity to buy practice in future when established physician retires. Contact: Carter McCorkle, D.O., Box 627, Mineola, 75773; or phone 214-569-5743 between 2:00 and 5:30 p.m. (24)

**GENERAL PRACTICE - DALLAS** — Private practice opportunity with the Family Medical Clinic and affiliate of Metropolitan Hospital. Excellent location, fast growing, southeast Dallas neighborhood. Attractive subsidy office by hospital. Multi-specialty support plus on-site lab, x-ray and pharmacy complement this dynamic environment. Contact Steve Peterson, Administrator, Metropolitan Hospital, 7525 Scyene Road, Dallas, 75227. Phone 214-381-7171 (44)

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

**AUSTIN** — Ambulatory Care Center with low volume. 4 1/2 per week; 4 weeks vacation per year; no call, no in-patients; no weekends. \$67,000. Call Elizabeth Adams at 512-892-4820. (46)

**PRACTICE FOR SALE** — and office building for lease. Please write Joseph L. Love, D.O., 4400 Red River Street, Austin, 78751 or call 512-452-7641. (30)

**OBSTETRICIAN/GYNECOLOGIST** — The Corpus Christi Osteopathic Hospital is a 140-bed teaching hospital located in southern Texas on the coast of the Gulf of Mexico.

Our Department of Obstetrics and Gynecology is seeking a board-eligible, board-certified obstetrician/gynecologist for routine OB and GYN surgery practice. The position would involve consultative responsibility along with participation in the intern training program. The position provides a comprehensive benefit/assistance package commensurate with experience.

Interested physicians should contact: Robert R. Tamez, Administrator, Corpus Christi Osteopathic Hospital, 1502 Tarlton Street, Corpus Christi, 78415; phone 512-886-2430. (18)

**NACOGDCHES** — Physician needed for family practice/minor emergency clinic. Modern well-equipped clinic in East Texas. Salary negotiable. Contact: University Drive Health Center, 409-564-1188. (48)

**PSYCHIATRIST-DALLAS** — Inpatient adolescent C/D unit needs an aggressive, highly physical medical director. Serves as the private attending for patients admitted to the unit and supervises treatment protocol. Previous experience with an established practice desirable. Interested candidates submit current C.V. and letter of introduction to Steve Peterson, Administrator, Metropolitan Hospital, 7525 Scyene Road, Dallas, 75227. (17)

**ORTHOPEDIC SURGEON** — Doctors Memorial Hospital, Tyler, is searching for an orthopedic surgeon. The hospital has recently purchased an additional \$175,000 worth of orthopedic equipment including a new C-arm, orthoscope, fracture table and so forth. Income potential unlimited, free office available. Contact Olie Clem, 1400 West S.W. Loop 333, Tyler, 75701. Phone: 214-561-3771. (50)

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

## POSITIONS DESIRED

**PHYSICIAN ASSISTANT (Board Certified)** — seeks part-time position; has five years experience as first assist to general surgeon. Interested in general surgery, internal medicine and family practice. Contact: John G. Henevady, 1111 N. O'Connor Road, No. 121, Irving, 75061. Phone 214-254-6523. (07)

**AMERICAN MEDICAL GROUP, P.A.** — is seeking parttime, personable, qualified general or family practitioner with emergency room to staff a low volume, small hospital ER in the metroplex. Physician must have his/her own malpractice insurance. If interested, call Henry Underwood, D.O., at 214-867-9998. (42)

## OFFICE SPACE

**FINISHED OUT MEDICAL SPACE** — 1,470 sq. ft. space available at the Northwest Health Care Center in Hurst, Texas, a suburb of Fort Worth. Inside medical office complex with surgery center, lab, diagnosis center and pharmacy. Please call Les Hill at 817-498-9211 for more information. (43)

**NORTH DALLAS/PARK CITIES** — ideal office space available. Over 1,000 sq. ft. finished out space. Located in Highland Park, near North Central Expressway, it is a perfect location for an osteopathic practice. For further information contact John Hawkins 214-392-9767. (52)

**MEDICAL OFFICE BUILDING** — 1,800 sq. ft. Medical Office fronting Bedford Eules Road in the growing Mid-Cities. Located in highly visible strip center with three exam rooms plus lab room and more! Call Doug Jennings at 817-336-2055. (21)

**"MULTI DOCTOR"** — Medical office space for lease in Bryan/College Station (population approximately 125,000), currently only one D.O. Need unique doctor that is preventative medicine oriented to occupy approximately 1,200 sq. ft. at \$9 per foot including utilities and x-ray equipment. Call Dr. Kevin Schachterle, D.C. at 409-696-2100. (35)

**NEW OFFICE FOR MEDICAL PRACTICE** — 1,300 sq. ft. finished and ready for occupancy. Reception area with business office, two examination rooms, private office, x-ray, bathroom and small laboratory space. Office can be expanded to 2,660 sq. ft. Located in Grand Prairie, five minutes from Dallas/Fort Worth Medical Center. Please call George Miller, D.O., 214-969-7477 for more information or to make an appointment to see the property. (05)

**PROFESSIONAL OFFICE SUITE AVAILABLE** — in prospering northeast Tarrant County, part of the Dallas/Fort Worth Metroplex. Professional building adjacent to HCA Northeast Community Hospital, 1401 Airport Freeway, Bedford, 76021. Contact: Mr. Phil Young, HCA Northeast Community Hospital, 817-282-9211. (20)

**EXCELLENT OPPORTUNITY** — for one or two doctors to have General Family Practice inside city limits but rural setting close to two well established osteopathic hospitals. Banker anxious to talk to doctors willing to settle this location. (32)

## MISCELLANEOUS

**FOR SALE** — Two bedroom, two bath house with two large stone fire places in DeCordova Bend Estates, Granbury. Ideal 2nd home or rental property. \$79,500. Call 817-326-4584 for more information. (54)

**FOR SALE** — GE 3 Phase 600mA-125kVp with a 90/90 table. Radiographics, fluoroscopic system. For details call X-Ray Systems at 817-478-3739. (6)

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

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

**QBC FOR SALE** — 1985 Model. All supplies included. Like new. Performs RBC, Hemoglobin, Hematocrit, WBC, Segs/Lymphs/Mono Platelets. 1/2 price \$4000/best offer. Please call 817-431-2573 or 498-1818. (33)

**SIGMOIDOSCOPE FOR SALE** — ACMI Model TX 91S flexible fiberoptic sigmoidoscope and halogen light source. \$3900. Contact 817-477-2660.

**FOR SALE** — Ames serialyzer in excellent condition. Includes full blood chemistry, pheophylline and potassium. Asking \$2,000. Contact: William R. Boone, D.O., 214-391-1168. (11)

**FOR SALE** — Practice; equipment and clinic in small north Texas town. Patient census approximately 35 per day. Two nursing homes in town. Lots of good will. Excellent opportunity for a young physician. Contact: TOMA, Box "402", 226 Bailey Avenue, Fort Worth, 76107. (15)

**FOR PHYSICIANS AND RESIDENTS** — Unsecured signature loans \$5,000 - \$60,000. No points or fees. Competitive rates-level payments, up to six years to repay. Deferred Principle option. For information and application, call Austin 512-836-9126. Medifinancial Services, Harper or 1-800-331-4952, MediVersal, Dept. 114. (01)

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