

Texas

DO

Texas Osteopathic
Medical Association

March 1989

CONTINUING MEDICAL EDUCATION

at the

90th Annual Convention & Scientific Seminar

April 27-29, 1989

**Sheraton CentrePark Hotel/Arlington Convention Center
Arlington, Texas**



FOR INFO

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House Meeting page 18

For Your Information

| | |
|---|-----------------------|
| American Osteopathic Association | 312/280-5800 |
| Washington Office | 800/621-1773 |
| | 202/544-5060 |
| | 800/962-9008 |
| American Osteopathic Hospital Association | 703/684-7700 |
| Professional Mutual Insurance Company | 800/821-3515 |
| Risk Retention Group | 816/523-1835 |
| TOMA Malpractice Insurance Program: | |
| For Premium Rates, | |
| Enrollment & Information | 800/544-8560 |
| Texas College of Osteopathic Medicine | 817/735-2000 |
| Dallas Metro | 429-9120 |
| Medicare Office: | |
| Part A Telephone Unit | 214/470-0222 |
| Part B Telephone Unit | 214/647-2282 |
| Profile Questions | 214/669-7408 |
| Provider Numbers: | |
| Established new physician (solo) | 214/669-6162 |
| Established new physician (group) | 214/669-6163 |
| All changes to existing provider number records | 214/669-6158 |
| Texas Medical Foundation | 512/329-6610 |
| Medicare/Medicaid General Inquiry | 800/252-9216 |
| Medicare Beneficiary Inquiry | 800/252-8315 |
| Medicare Preadmission/Preprocedure | 800/252-8293 |
| Private Review Preadmission/Preprocedure | 800/252-9225 |
| Private Review General Inquiry | 800/252-9225 |
| Texas Osteopathic Medical Association | 817/336-0549 |
| in Texas | 800/444-TOMA |
| Dallas Metro | 429-9755 |
| in Texas | 800/444-TOMA |
| TOMA Med-Search | |
| TEXAS STATE AGENCIES: | |
| Department of Human Services | 512/450-3011 |
| Department of Public Safety: | |
| Controlled Substances Division | 512/465-2188 |
| TriPLICATE Prescription Section | 512/465-2189 |
| State Board of Health | 512/458-7111 |
| State Board of Medical Examiners | 512/452-1078 |
| 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 |

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The Advertising contained in this magazine is not necessarily endorsed by the Texas Osteopathic Medical Association.

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Tom Hanstrom, Editor
Diana Finley, Associate Editor
Lydia Anderson Smith, Staff Writer

Calendar of Events



MARCH

8-12

ACGP Convention

Mariott Hotel
San Antonio

Contact: ACGP

2045 S. Arlington Heights Road
Suite 104
Arlington Heights, Illinois 60005
312/228-6090
800/323-0794

16

TOMA District V Meeting

Presidential Visitation

Contact: Kenneth Bayles, D.O.
President, TOMA D-5
214/331-6444

29

"Symposium on Respiratory Tract Infections"

Sponsored by Texas College of
Osteopathic Medicine

Funded by Glaxo, Inc.

Fairmont Hotel
Dallas

CME: 6 hours Category 1-A

Contact: TCOM

Dept. of Internal Medicine
817/735-2333

APRIL

1

"A Spring Update for the Family Practitioner III"

Presented by: Dallas Family
Hospital and TCOM — Office of

Continuing Medical Education

Supported by: Dallas Southwest

Osteopathic Physicians, Inc.

Location: Dallas Family Hospital

2929 S. Hampton Road
Dallas, Texas

Hours: 7 CME, Category 1-A

Contact: Cheryl Cooper

TCOM, Dept of CME
817/735-2539

25

TOMA Pre-Convention

Board of Trustees' Meeting
Sheraton CentrePark Hotel

Arlington

Contact: TOMA

817/336-0549

26

TOMA House of Delegates Meeting

Sheraton CentrePark Hotel
Arlington

Contact: TOMA

817/336-0549

27-29

30th Annual Convention & Scientific Seminar

Texas Osteopathic Medical Assoc.

Sheraton CentrePark Hotel
Arlington

Contact: TOMA

817/336-0549

29

TOMA Post-Convention

Board of Trustees' Meeting
Sheraton CentrePark Hotel

Arlington

Contact: TOMA

817/336-0549

JUNE

8-10

"The National Osteopathic Conference on Aging"

Presented by: The Great Lakes

Geriatric Education Center in

conjunction with the Chicago

College of Osteopathic Medicine

Hyatt Regency Oak Brook

Just outside of Chicago, Illinois

Hours: 16 CME, Category 1-A

Contact: Ms. Wenda Kingma

Program Coordinator
312/947-4867

15-17

1989 International Symposium

"The Central Connection:

Somatovisceral/Viscerosomatic
Interaction"

Sponsored by American Academy
of Osteopathy

Omni Netherland Plaza

Cincinnati, Ohio

Fee: \$100, physicians

\$ 50, Ph.D.s

\$ 25, students

Contact: Mrs. Vicki E. Dyson

AAO Executive Director

12 West Locust Street

P.O. Box 750

Newark, Ohio 43055

614/349-8701

July

13-15

AOA Board of Trustees

Opryland Hotel

Nashville, Tennessee

Contact: AOA

Convention Office

1/800/621-1773

16-17

AOA House of Delegates

Opryland Hotel

Nashville, Tennessee

Contact: AOA

Convention Office

1/800/621-1773

Pre-Register-Win a DeLuxe Double Room for Four Nights



DRAWING WILL BE HELD AT THE FUN NIGHT PARTY
SATURDAY, APRIL 29
AT THE ARLINGTON CONVENTION CENTER

Texas Osteopathic Medical Association 90th Annual Convention

Doctors pre-registration — \$275; Doctors at-the-door — \$325;
Spouses, Military, Retired, Interns, Residents and Associates — \$150;
Students (includes meals) — \$75; Students (lectures only) — \$00.

To take advantage of the advance registration discount, payment must accompany this form.

PRE-REGISTRATION DEADLINE — APRIL 15

Name _____ (please print) First Name for Badge _____
My Spouse _____ will _____ will not _____ accompany me.
(first name for badge)
My Guest _____ will _____ will not _____ accompany me.
(first AND last name for badge)
City _____ State _____ AOA Membership No. _____
D.O. College _____ Year Graduated _____

TOMA Annual Golf Tournament Registration

Name _____
Address _____
Handicap _____

\$50 per person
includes
½ cart, green fees, transportation
(Cash Bar)
Riverside Golf Club
Friday, April 28, 1989

CHECK ENCLOSED _____
(please make payable to TOMA)

Refund Policy

The REFUND POLICY for the 90th Annual Convention is as follows: All cancellations must be received in writing; no telephone cancellations will be accepted. A \$25.00 processing fee will be charged to all registrants who cancel. If cancellation is necessary, the following policy will apply:

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

30-45 days prior to program, 50 percent of fees paid will be refunded.

15-30 days prior to program, 25 percent of fees paid will be refunded.

Less than 15 days prior to program, NO REFUND.

Every Physician Who Moves Into My Building Succeeds Almost Instantly!

And I'll Guarantee YOUR Success PLUS Free You From All The Hassles Of Running Your Office!

Hello, my name is Sam Jorrie. I own a Medical Office Building in an area where there are over 330,000 people and only 60 or 70 doctors.

Compare that to the big Medical Center in San Antonio where there are 600 doctors for 330,000.

Do you know what that means? It means that in my area there is a huge demand for medical services — and virtually no competition!

Best of all, my building is *right across the street* from Village Oaks Regional Hospital.

As a result, every physician who moves into my building succeeds almost immediately — with results that are absolutely amazing!

Let me give you some examples of what I mean, taken from actual case histories.

Then I'll explain how I can *guarantee* your success . . . help get your practice off to a fast start . . . and free you from the petty hassles and headaches of running an office!

Here are those case histories:

● **CASE #1:** A female Family Practitioner moved into our Building in April 1987. She had been in practice at another location for about nine months. By the end of 1987 she had accumulated 1,200 Patients. She has four assistants in her offices. When summer came the second year she reduced hours to keep from working so very hard.

● **CASE #2:** An Ophthalmology Group with three Physicians has a booming business where they also have to wait for an appointment and who often have to fifteen patients waiting in the waiting room.

● **CASE #3:** An Internal Medicine partnership of two is presently considering expansion, taking in another physician and taking on more office space to accommodate growth in their practices.

● **CASE #4:** There is a single Dermatologist in the area and to get an appointment he often requires ten days to two weeks.

● **CASE #5:** A Pulmonologist-Internist completed his Military obligation and opened his office in our Building September, 1987. His business took off like a rocket and now seeks another physician or an Association to be able to keep up with the work load to have a "covering" arrangement that is dependable. He plans to bring in a second Pulmonologist to a space next door to his present offices also. He had zero waiting because he came straight out of the Army to our Building.

● **CASE #6:** A Gastroenterologist concluded his Military obligation in August, moved his practice in our Building on September 15, just a few months ago, and told after a month that he will take in more than his direct expenses during his third month. Since he came direct from the Air Force, he has zero following.

Just Look At The Numbers!

There are several reasons why you would succeed faster and easier by locating in my building than at any other place you choose. The "numbers" are the main reason.

As I mentioned, the Medical Center in San Antonio has 600 doctors serving roughly 330,000 people. That's one doctor for every 550 people. But at the Village Oaks Regional Hospital there are only 60 or 70 doctors serving an equal number of people (330,000). That's one doctor for every 5,500 people.

So if you'd like to locate your practice where there is the greatest demand for your services — and where you can reach the greatest level of success in the shortest period of time — the Medical Center in San Antonio is NOT the place you want to be.

The Village Oaks Regional Hospital IS.

And since my new building is right across the street from Village Oaks, it's the most logical choice for your new office!

(By the way, the only other office building closer to the hospital than mine is a study hall. You couldn't get into it even if you wanted to.)

But that's not all.

We Help Your Practice Start Out Big

And STAY BIG!

When you decide to place your offices in my building, you get two valuable services that will help your practice off to a great start and ensure your rapid success.

PROFESSIONAL MARKETING PLAN

When you decide to place your offices in the Northeast area in the TOEPPERWEIN MEDICAL CENTER, we implement a soundly researched PROFESSIONAL MARKETING PLAN, "no cash required" and . . . IT REALLY WORKS!

FIRST: LOCATION It is of primary importance to advise your Patient Prospects if you are located in the Northeast and particularly in the TOEPPERWEIN MEDICAL CENTER and we do this for Primary Care Physicians by arranging a mailing of 10,000 announcements to Residents of homes surrounding the Village Oaks Hospital. We promote secondary care practices to prospective "referring" Physicians.

SECOND: NAME AND SPECIALTY Your name, specialty, phone number and e-mail number will be displayed on our streetside sign on Toepperwein Road (a heavily travelled thoroughfare) . . . the sign is lighted from dusk until dawn.

THIRD: OPEN HOUSE We arrange for an Open House by sending about 500 invitations to people who are important to the development of your Practice. If you are a Primary Care Physician we direct the invitations to everyone you will need to meet in area plus all those whom you and we think will help grow your Practice. This will be a world of time as you do not have to waste time working to meet these people.

If you are not a Primary Care Physician then we invite to the Open House all Primary Care Physicians and others from whom you want to develop referrals.

● **FOURTH: ADVERTISE** We advertise your Practice Opening in local newspapers and in the *Bexar County Medical Society Magazine* and Newsletter.

● **FIFTH: REFERRAL** We receive many inquiries for Physicians of various specialties which of course we refer to you as it befits your specialty . . . another benefit to help establish your practice.

You put up "NO MONEY" for any of the above. We pay the bills and charge them against the credit we give you upon execution of the lease (described below). Every move into my Practice needs help with a loan for equipment and supplies and for carrying the normal costs, rent, electricity, phones and miscellaneous until you take in enough income to handle those expenses from your practice.

We have three major helps for you in this area.

FINANCIAL PREPARATION ASSISTANCE

We can provide a complete financial operating plan for your Practice at no cost to you . . . here's how. Our Accountant has the entire plan laid out in his Computer. He also sells supplies and charges at only ordinary prices.

When you sign a lease with us, we arrange for him to build a financial plan for obtaining the financing . . . by simply getting him to put your figures for income and expected activity into his Computer. Normally Medical Services charge several thousands of dollars for a financial plan for your operations . . . your cost when you lease from us is only asking you to buy supplies from the Accountant.

Best of all, we have several references for him from Doctors in our Building who use his services and are tickled with the services and the Accountant.

Second, you may need a Bank from which to obtain a loan for the financing of your Practice. We are associated with International Bank of Commerce who is anxiously looking for opportunities to finance Doctors. All we do is take you and your financial plan to the Bank, introduce you to the Vice President Victor Fellen and he takes the project over from there. Unless you have a "bad" history, financing is easy.

Third, you need an office in which to practice where you can pay full and complete attention to your Patients and your Practice of Medicine and not be required to spend any time worrying about your offices or anything connected with your offices.

That's where we come in! Toepperwein Medical Center has as its principal goal . . . to free you 100% from all and any problems relating to your occupancy of your office space and the Building. **WE TAKE CARE OF ALL THE HASSLES!**

Toepperwein Medical Center provides a monthly questionnaire regarding service . . . so that the service is "top flight" . . . all the time! If your air conditioner does not work, or your plumbing needs fixing or you need light tubes or other services, simply call us and we aggressively solve the problem at once, if possible and if not possible as soon as we can. No cost to you! **WE TAKE CARE OF ALL THE HASSLES!**

Our janitorial service cleans your space as many nights as you work days. No cost to you!

TMC has the easiest parking arrangement in the area . . . 221 parking spaces at ground floor level plus a covered parking space for each Physician so that your car is not "hot like an oven" on hot, hot days, when you need it! Your covered parking space is labelled with your name. We even carry your mail daily to the General Post Office because it makes your mail move faster!

You can lease offices at the Toepperwein Medical Center at amazingly low cost . . . **You pay no rent at the beginning to help you get your practice started!**

Your office space in the Toepperwein Medical Center is "built-out" (completely finished) at no cost to you!

Each office suite has four exam-treatment rooms complete with a storage cabinet, sink with hot and cold water. We can arrange for needed physical adjustments.

Each suite has its own air conditioner and hot water heater so that you control the temperature in your offices and the temperature of the hot water as you prefer.

Your records, equipment, offices and the Building are protected against loss by fire by an automatic fire sprinkler system and a Burglar Alarm System.

A Ranger American Patrol Person is on call at all times.

There is an "escape" door in each suite.

If you take a five year lease, you will receive a credit of the equivalent of a year's rent (\$23,100) in front of the five year lease, a credit of six months' rent (\$11,550) in front of a three year lease.

To keep you from being afraid, you may cancel your lease for any reason after you have paid rent for one year.

Your success is guaranteed by us, for if you are not successful or simply do not like the place, you are "freed" from your lease by this cancellation privilege.

You can find out if all of this is true by inquiring of some of our Tenants . . .

Doctor Jocelyn James, Family Practice, 590-3504;

Doctor Harvey Richey, Pulmonologist, 599-1818;

Doctor Robert Narvaez, Gastroenterologist, 650-9119.

You will enjoy visiting our Building. COME AND SEE!

Please phone me for more information and for an appointment.

(512) 653-9898

12602 Toepperwein Road

San Antonio, Texas 78233

Sam Jorrie, Owner

TOMA 90th Annual Convention & Scientific Seminar

Sheraton CentrePark Hotel / Arlington Convention Center
April 25-29, 1989

Program

Tuesday, April 25

- 12:00 noon TOMA Board of Trustees' Luncheon
Triple Crown; Sheraton CentrePark Hotel
- 1:00 p.m. TOMA Board of Trustees' Meeting
Super Bowl I & II; Sheraton CentrePark Hotel
- 6:30 p.m. Caucus of the Districts
Yacht Club; Sheraton CentrePark Hotel

- 9:00 a.m. - "Medical Practice Act of Texas; Function,
12:00 noon disciplinary responsibilities and activities of the
Texas State Board of Medical Examiners"
Michael Young, J.D.

"Impaired Physicians"
R.E. Liverman, D.O.

- 9:20 a.m. "Identification of Addictive Personalities in
Primary Care" — Charles Bowden, M.D.

- 10:00 a.m. Refreshment Break with the Exhibitors
Exhibit Hall/Arlington Convention Center

- 10:30 a.m. "Practical Detoxification of Chemical Dependency"
W. Robert Gehring, M.D.

- 11:10 a.m. "Profile of the Chemically Dependent Athlete"
Walt Sweeney

- 11:50 a.m. "Recent Advances and Management
in Cocaine Abuse"
Barry Fenton, M.D.

- 12:45 p.m. Keynote Luncheon
Rooms E-2 & E-3; Arlington Convention Center

- 2:00 p.m. - Risk Management Seminar Part II
4:00 p.m. Room M-5; Arlington Convention Center

"Patient Record Keeping"
John H. Sortore

"Controlled Substance Statutes and Rules"
Captain B. C. Lyon

- 2:20 p.m. - "Treatment Intervention and Return to Competi-
tion or Work"
E. Lee Rice, D.O.

- 3:00 p.m. "Use of Ergogenic Aides"
Richard A. Parker, D.O.

- 3:40 p.m. Panel Discussion:
"What can we as physicians and families do
to help in Long Term Rehabilitation"
Panel Leader: Wayne English, D.O.
Panel Members: Speakers of the day

- 4:30 p.m. Visit with the Exhibitors (COCKTAIL HOUR)

- 5:00 p.m. POPPS Reception
Yacht Club; Sheraton CentrePark Hotel

- 7:00 p.m. Sustainer's Party
Champions III; Sheraton Centre Park Hotel

Wednesday, April 26

- 8:00 a.m. - TOMA House of Delegates' Registration
12:00 noon Prefunction I; Sheraton CentrePark Hotel
- 9:00 a.m. TOMA House of Delegates' Meeting
Champions I; Sheraton CentrePark Hotel
- 12:00 noon TOMA House of Delegates' Luncheon
Champions II; Sheraton CentrePark Hotel
- 1:00 p.m. ATOMA Board of Trustees' Luncheon/Meeting
Triple Crown; Sheraton CentrePark Hotel
- 2:00 p.m. - Early Registration
5:00 p.m. Exhibit Hall/Arlington Convention Center

Thursday, April 27

- 7:00 a.m. General Convention Breakfast
Guest Speaker: Mr. Billy Clayton
Rooms M-7 & M-8; Arlington Convention Center
- 7:30 a.m. Registration and Visit with the Exhibitors
- 4:00 p.m. Exhibit Hall/Arlington Convention Center

(ALL LECTURES WILL BE HELD IN ROOM "E-4" OF THE
ARLINGTON CONVENTION CENTER UNLESS OTHERWISE
NOTED) ACCESS TO THE LECTURE HALL IS THROUGH
THE EXHIBIT HALL . . .

- 8:00 a.m. "Society in Conflict"
E. Lee Rice, D.O.
- 8:40 a.m. "Substance Abuse in Sports and Industry"
Richard A. Parker, D.O.
- 9:00 a.m. ATOMA House of Delegates' Meeting
World Series I & II; Sheraton CentrePark Hotel
- 9:00 a.m. - Risk Management Seminar: Part I
12:00 noon Room M-5; Arlington Convention Center
- "Malpractice or Professional Liability"
Eli P. Bernzweig, J.D.

Friday, April 28

- 7:00 a.m. Texas ACPG Breakfast
Triple Crown; Sheraton CentrePark Hotel
- 7:30 a.m. Registration and Visit with the Exhibitors
Exhibit Hall/Arlington Convention Center
- 7:30 a.m. TOMA Annual Golf Tournament
Riverside Golf Course
(Bus leaves in front of Sheraton CentrePark Hotel)
- 8:00 a.m. "Setting the Stage for Comprehensive
Management of Back Pain"
Wayne R. English, Jr., D.O.
- 8:40 a.m. "D.O.s 'Secret' Weapon"
Michael Kuchera, D.O.
- 9:20 a.m. "Designing Manipulative Prescription"
Jerry Dickey, D.O.
- 10:00 a.m. Refreshment Break with the Exhibitors
Exhibit Hall/Arlington Convention Center
- 10:00 a.m. Texas Academy of Osteopathy Meeting
Arlington Convention Center
- 10:45 a.m. "Non-Surgical Approach to Lumbar Radiculopathy"
Warren L. Schildberg, D.O.
- 1:25 a.m. "Functional Restoration for the
Failed Back Syndrome"
Peter Polatin, M.D.
- 1:30 a.m. ATOMA Installation Luncheon
World Series I & II; Sheraton CentrePark Hotel
- 2:15 p.m. "Demonstration of the Manipulative Prescription"
Jerry Dickey, D.O.
- 2:45 p.m. AOA Luncheon
Guest Speaker: William H. Voss, D.O.,
AOA President-Elect
Rooms E-2 & E-3; Arlington Convention Center
- 2:30 p.m. - Hands-on Workshop; (4) 30-Minute Sessions
Coordinator: Jerry Dickey, D.O.
- each workshop will be repeated (times)
- High Velocity Low Amplitude (Thrusting Techniques)
Michael Kuchera, D.O.
Room M-1; Arlington Convention Center
- "Indirect Techniques"
David Teitlebaum, D.O.
Room M-5; Arlington Convention Center
- "Direct Muscle Energy"
Jerry Dickey, D.O.
Room M-7; Arlington Convention Center
- "Specific Diagnosis"
David Vick, D.O.
Greg Dott, D.O.
Room M-9; Arlington Convention Center
- 4:30 p.m. Visit with the Exhibitors (COCKTAIL HOUR)
- 5:30 p.m. President's Night Reception
Prefunction I & II; Sheraton CentrePark Hotel
- 7:30 p.m. President's Night Banquet
Champions Ballroom; Sheraton CentrePark Hotel
- 9:00 p.m. President's Night Entertainment:
Alternating Auxiliary Auction and Dancing
Champions Ballroom; Sheraton CentrePark Hotel

Saturday, April 29

- 7:30 a.m. Visit with the Exhibitors
Exhibit Hall/Arlington Convention Center
- 8:00 a.m. Alumni Meetings
TCOM: Rooms M-9, 10, 11; Arlington
Convention Center
KCOM: Room M-7; Arlington Convention Center
- (ALL LECTURES WILL BE HELD IN ROOM E-4 OF THE
ARLINGTON CONVENTION CENTER UNLESS OTHERWISE
NOTED) ACCESS TO THE LECTURE HALL
IS THROUGH THE EXHIBIT HALL...
- 8:00 a.m. "Panic and its Effect on Chronic Pain"
Wayne Jones, M.D.
- 8:40 a.m. "Stress and the Heart"
James Buell, M.D.
- 9:20 a.m. "Hypertension and Cardiac Risk Factors"
James Wells, M.D.
- 10:00 a.m. Refreshment Break with the Exhibitors
Exhibit Hall/Arlington Convention Center
- 10:30 a.m. "Assessment or Diagnosis and Management of
Polythralgia and Fibromyositis"
Bernard R. Rubin, D.O.
- 11:10 a.m. "Topical Tretinoin Therapy: Its Use in
Photoaged Skin"
Jonathon S. Weiss, M.D.
- 12:00 p.m. Lunch on your own
- 12:00 noon TOMA Board of Trustees' Luncheon
World Series I; Sheraton CentrePark Hotel
- 1:00 p.m. TOMA Board of Trustees' Meeting
Super Bowl I & II; Sheraton CentrePark Hotel
- 1:00 p.m. ATOMA Board of Trustees' Luncheon/Meeting
World Series II; Sheraton CentrePark Hotel
- 1:30 p.m. - Fitness Assessment Program
4:30 p.m. Room E-4; Arlington Convention Center
- 1:30 p.m. - AIDS Management Seminar
4:30 p.m. Room M-1; Arlington Convention Center
- 1:30 p.m. - "Structural Consultation and Treatment Service"
4:30 p.m. (Anyone interested in participating in this service, please contact Dr. David Teitlebaum)
- 6:30 p.m. Fun Night Carnival
Rooms E-2 & E-3; Arlington Convention Center

Introducing 1989 Convention Speakers



Michael L. Kuchera, D.O., FAAO, will give a presentation entitled, "The D.O.'s 'Secret' Weapon" during the educational portion of this year's annual convention in Arlington, Texas. His lecture will delve into such areas as the philosophy that the body is a unit with homeostatic and self-healing mechanisms, and structure and function are interrelated. Applying this philosophy through OMT will include a discussion of supporting homeostasis, where to treat first and end with a talk as to 'The Secret.'

A 1980 graduate of Kirksville College of Osteopathic Medicine, Kirksville, Missouri, Dr. Kuchera interned at Richmond Heights General Hospital, followed up with a clinical EMG fellowship at Cleveland Clinic Foundation and Valley Neurology in Phoenix.

He is an assistant professor in the Department of Osteopathic Manipulative Medicine at KCOM as well as chairman and also maintains a general practice in Kirksville. In 1984, Dr. Kuchera received the Max T. Gutensohn Merit Award for Excellence in Teaching and in 1985, was the recipient of the A.T. Still Staff Award for Excellence in Teaching.

He has held and currently holds a host of offices on the community, state, national and international levels; presented numerous lectures throughout the years; received funding for grant applications and research awards, and is active in the area of professional publications. Some of the offices/memberships Dr. Kuchera currently holds include member of the Missouri Association of Osteopathic Physicians and Surgeons; Board of Governors of the American Academy of Osteopathy; consultant to Osteopathic Principles for National Osteopathic Board; AOA; Cranial Academy; clinical coordinator for National Levator Orthotics Program; vice chairman of the Osteopathic Principles Part II Test Construction Committee; International Back Pain Society and the American Academy for Electromyographers and Electrodiagnosticians.



Assessment and Management of Polyarthralgia and Fibromyositis" will be presented by Bernard R. Rubin, D.O., FACGP. According to Dr. Rubin, the Fibrositis Syndrome encompasses a clinical syndrome that may represent 10 to 15 percent of an active rheumatology practice. This syndrome has no specific diagnostic tests, and minimal objective physical signs. Symptoms include wide-spread aching of more than three months duration, disturbed sleep, morning fatigue and a co-existence with other stress-related disorders. The

management of the fibrositis syndrome requires patient understanding and reassurance, and pharmacologic therapy is sometimes effective. Dr. Rubin says that attendance at this presentation will enable physicians to better characterize patients with fibrositis. A social history and physical examination of these patients will be reviewed, and therapeutic options will be discussed and critiqued.

A 1976 graduate of Chicago College of Osteopathic Medicine, Dr. Rubin served a rotating internship at Chicago Osteopathic Hospital and a residency in internal medicine at Albert Einstein Medical Center, Pennsylvania. Rheumatology fellowships were completed at Albert Einstein Medical Center and Jefferson University School of Medicine, also in Pennsylvania. A fellowship in clinical immunology was taken at Hahnemann University School of Medicine, Pennsylvania.

Dr. Rubin is currently chief of the Division of Rheumatology and Clinical Immunology as well as an associate professor of medicine at TCOM. He is diplomate of the National Board of Examiners in Osteopathic Physicians and Surgeons, the American Board of Internal Medicine and the American Board of Internal Medicine (subspecialty - Rheumatology). So memberships include TOMA, AOA, American College of Osteopathic Internists, American Osteopathic College of Rehabilitation, Fellow of both the American College of Physicians and the American Rheumatism Association, American Federation of Clinical Research, New York Academy of Sciences, Dallas-Fort Worth Rheumatology Club, member of the Board of Governors of the Texas Rheumatism Society, and the Clinical Immunology Society.

Some activities include member of the Curriculum Committee and the Admissions Interview Pool for New Students at TCOM; member of the Medical and Scientific Committee of the Northwest Texas Chapter Arthritis Foundation; and member of the Multidiscipline Education Committee of the American Rheumatism Association. Dr. Rubin is active in research and has numerous approved and funded grants and contracts, and has authored or co-authored a score of publications.



"Panic and its Effect on Chronic Pain" will be discussed by Wayne C. Jones, M.D., during the 1989 TOMA Annual Convention and Scientific Seminar in Arlington. According to Dr. Jones, panic and anxiety disorders are the most common mental health problem, caused by genetic, neurophysiological, personal and stress factors. These need to be differentiated from

obsessive compulsive disorders, social phobia, generalized anxiety disorder and other medical problems. Social factors and addiction issues can complicate treatment.

A 1968 graduate of Southwestern Medical School, University of Texas, Dr. Jones completed a rotating internship and a psychiatry residency at Parkland and Presbyterian Hospitals, Dallas, from 1968-72. He served in the clinical faculty at Southwestern Medical School Department of Psychiatry from 1974-87.

Board certified by the American Board of Psychiatry and Neurology, Dr. Jones currently is in the private practice of psychiatry in Richardson and Dallas and is Medical Director of Phobia Centers of the Southwest, position he has held since 1982. He is also president of the medical staff of Richardson Medical Center and a national consultant and frequent speaker on panic, anxiety and phobic disorders.



Charles L. Bowden, M.D., will be speaking on "Identification of Addictive Personalities in Primary Care." Dr. Bowden says that the percentage of all adult patients who use anti-anxiety medications or who abuse other drugs is low. Less than two percent of all patients use anti-anxiety medications on a daily basis for as long as one year. These patients tend to be older, and to have major health problems. A careful medical assessment can identify a substantial percentage of patients likely to be regular users of benzodiazepines and other anti-anxiety agents. For substance abuse problems such as alcoholism and cocaine dependence, attention to the comorbid psychiatric disorders, especially anxiety and depression, is helpful in determining the treatment approach. According to Dr. Bowden, this presentation will also review steps the primary care physician can take to minimize inappropriate psychotropic medication use.

Dr. Bowden received his medical degree from Baylor College of Medicine, Houston, Texas, and interned at Presbyterian-St. Luke's Hospital, Illinois. He served a psychiatry residency at New York State Psychiatric Institute and Presbyterian Hospital, New York, and was a candidate in psychoanalytic training at Columbia Psychoanalytic Clinic for Training and Research, New York. He is currently professor in the Department of Family Practice as well as professor in the Department of Pharmacology at The University of Texas Health Science Center at San Antonio (UTHSCSA). Additionally, Dr. Bowden is a professor in the Department of Psychiatry at The University of Texas Health Science Center (Medical School) in San Antonio.

Board certification includes Diplomate in Psychiatry, American Board of Psychiatry and Neurology, and hospital appointments and consultantships include consultant to the U.S. Veterans Administration Hospital in Greenville, Texas; consultant to Audie L. Murphy

Memorial Veteran's Administration Hospital in San Antonio; attending psychiatrist at Bexar County Hospital District, San Antonio; and Medical Advisory Board for Drivers Licensing, Texas State Department of Health.

Some professional society memberships include American Psychiatric Association; various committee memberships in the Texas Society of Psychiatric Physicians; Bexar County Psychiatric Society; American Medical Association; American College of Neuropsychopharmacology; and Collegium Internationale Neuro-psychopharmacologicum. Dr. Bowden is active in publications, books and abstracts, research support as principal investigator and is heavily involved in delivering invited presentations.



"Stress and the Heart" is the topic to be delivered by James Buell, M.D. His presentation will focus on animal studies, neuroendocrine response patterns, sudden cardiac death and clinical observations.

Dr. Buell received his M.D. degree at the University of Nebraska College of Medicine, Omaha, Nebraska, and interned at the University of Nebraska Hospital, where he also took an internal medicine residency. Dr. Buell then completed an NIH Cardiovascular Research Fellowship at the University of Nebraska; a clinical cardiology fellowship at Emory University Hospital, Georgia; and a clinical cardiology fellowship at the University of Wisconsin Hospital, Veterans Administration Hospital, Wisconsin.

He is presently an associate professor of medicine, Division of Cardiology, at Texas Tech University Health Sciences Center, Lubbock, Texas, as well as chief of cardiology at Texas Tech University Health Sciences Center.

Professional organizations include fellow of the American College of Angiology; American Medical Association; Academy of Behavioral Medicine Research; Society for Psychophysiological Research; Texas Medical Association; and the Association for the Advancement of Medical Instrumentation. Dr. Buell has had numerous published publications and is very involved in the presentation of lectures and papers as well as panel participation.



Jerry L. Dickey, D.O., F.A.O., will speak on "Designing the Manipulative Prescription" during the clinical session of this year's convention. According to Dr. Dickey, physicians are used to using a certain thought process and protocol for establishing the use of medical modalities. The same protocol in modified forms is used to decide for physical therapy or for chemotherapeutic agents, and can also be used in the decision to use, and the selection of, manipulative

treatment for patient problems. The purpose of this presentation will be to present a logical, rational approach for understanding when and how to employ different kinds of manipulative treatment in patient care. It is predicated on specific diagnosis preceding to treatment design based on a well recognized approach.

A graduate of Kirksville College of Osteopathic Medicine, Kirksville, Missouri, Dr. Dickey participated in a pre-doctoral fellowship (three for two) in the Department of Osteopathic Theory and Methods at KCOM. He served his internship at Kirksville Osteopathic Hospital.

A fellow of the American Academy of Osteopathy, Dr. Dickey is currently chairman/associate professor of the Department of Manipulative Medicine at Texas College of Osteopathic Medicine. Memberships in professional societies include TOMA, AOA, Missouri Association of Osteopathic Physicians and Surgeons, American Academy of Osteopathy, and Northeast Missouri Osteopathic Association.

Other activities/memberships include member of the Editorial Review Board, Journal of the American Osteopathic Association; member of the Educational Council on Osteopathic Principles; Consultant to the Institute for Gravitational Strain Pathology; medical consultant to the Adair County Multiple Sclerosis Support Group; and lecturer to freshmen, junior and sophomores at TCOM. Dr. Dickey is heavily involved in research activity, publications and presentations at scientific/professional meetings. He is currently working under a Levitor Grant, American Philanthropic Association.

* * * * *

"Topical Tretinoin Therapy: Its Use in Photoaged Skin" will be discussed by Jonathon S. Weiss, M.D. According to Dr. Weiss, tretinoin cream has now been used extensively to reverse the changes of photoaging. It is the first topical therapy to undergo controlled clinical testing and proved to be efficacious for this purpose. These results have been substantiated with photography, histopathology, and skin surface replicas. The exact mechanism of action of retinoic acid is unknown, but it may work by binding to a specific receptor altering the gene expression of the cell. Therapy is most successful when a liberal amount of tretinoin 0.1 percent cream is applied to the skin daily. Tretinoin cream has an excellent safety record; a local cutaneous hyper-vitaminosis A reaction is the only common problem.

Dr. Weiss received his M.D. degree from the University of Michigan Medical School, Ann Arbor, Michigan. He interned in the Department of Internal Medicine at the University of Michigan Medical School and took a dermatology residency at the same location. He is a Diplomate of the American Board of Dermatology and

board certified by the National Board of Medical Examiners.

Dr. Weiss holds membership in the American Medical Association; American Academy of Dermatology; Society for Investigative Dermatology; Atlanta Dermatological Association; and Phi Delta Epsilon Medical Fraternity.

Some awards include the National Forensic League Certificate of Honor; National Merit Scholarship Finalist; Cum Laude; Phi Beta Kappa Certificate of Commendation; Michigan State Dermatologic Society Research Award; and the Upjohn Resident Research Award.

Dr. Weiss is involved in publications, making presentations to national and local meetings and research.

He is in practice in Atlanta, Georgia, at the Emory Clinic and also is Assistant Professor of Dermatology and Director of the Clinical Pharmacology Unit of the Department of Dermatology at Emory University School of Medicine, Atlanta.



"Setting the Stage for Comprehensive Management of Back Pain" will be presented by Wayne R. English, Jr., D.O., FAOCCRM, who is also the 1989 program chairman.

According to Dr. English, the purpose of this lecture is to pave the way for the topics to be presented and the "hands-on" sessions to be held throughout the rest of the day. There will be a brief review of the anatomy, biomechanics and physiology needed to maintain normal structural integrity, which will be integrated with the pathophysiology leading to the "problem back."

References will be made to some of the recent research being done to show the importance of maintaining normal range of motion in articular areas as well as "mobility in thinking" so as to prevent severe pathological consequences of disuse and immobility on the soft tissues directly involved as well as the overall conditioning of the injured and/or disabled person.

Discussion will also be held on the importance of early evaluation of the patient's behavioral patterns and problem environmental stresses so as to anticipate and hence, prevent the development of the vicious cycle of long-term chronic pain, muscle splinting, motion restriction, fear, depression, muscle ischemia and more pain.

Hopefully, says Dr. English, this lecture will set the stage for reminding the osteopathic physician of his/her unique tools for using a "body-mind" approach to the speedy correction of back pain.

Dr. English is a 1958 graduate of Philadelphia College of Osteopathic Medicine and interned at Massachusetts

Osteopathic Hospital, where he also completed a fellowship. Additionally, in 1969, he completed a postdoctoral fellowship in rehabilitation medicine at KCOM.

Certified in rehabilitation medicine and a fellow of the American Osteopathic College of Rehabilitation Medicine, Dr. English is currently Medical Director and founding member of the Texas Institute of Sports Rehabilitation and Fitness in Bedford, Texas.

Some of his numerous professional memberships include TOMA, TOMA District II, AOA, American Osteopathic Academy of Sports Medicine, American Osteopathic College of Rehabilitation Medicine, North American Academy of Manual Medicine, Dallas/Fort Worth Society of Physical Medicine and Rehabilitation, Texas Medical Foundation and the American College of Sports Medicine. Additionally, Dr. English serves as a member of the Advisory Committee on Physical Utilization of the Texas Industrial Accident Board and as Crew Chief for the Athletics Congress of the U.S.A. for Drug Testing.

He holds staff privileges at Fort Worth Osteopathic Medical Center, Northeast Community Hospital and is a consulting member at Dallas/Fort Worth Medical Center - Grand Prairie. ■

Industrial Medicine Workshop To Be Held During TOMA Convention

In conjunction with the 1989 TOMA convention, the Texas Institute of Sports, Rehabilitation and Fitness, associated with Northeast Community Hospital in Bedford, is offering an Industrial Medicine Workshop on Saturday, April 29.

Topics to be covered include: work-site evaluation; pre-employment evaluations; rehabilitation/extended rehabilitation/work hardening; and return to work/functional capacity testing.

The Institute staff will be presenting its unique Sports Medicine approach to Industrial Medicine. Physicians associated with the Institute, Wayne R. English, Jr., D.O. (Medical Director) and Christopher R. Mann, D.O., will speak on their use of the evaluation tools and rehabilitation philosophy treatment of Industrial-related injuries.

The workshop is designed to present preventative ideas and treatment approaches to Industrial injury with a Sports Medicine philosophy. ■

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A problem so widespread...88% of physicians realize it afflicts at least 1 out of 3 American adults.^{1,2}

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FASTIN®[®] IV (phentermine HCl) 30 mg capsules

*Preferred by physicians over
other well-known anorectics.¹*

Please see summary of prescribing information on next page.

References:

1. Results based on 6,831 physician responses to a recent survey (note: Not all responding physicians answered all questions). Data on file, Beecham Laboratories.
2. Weiss ST. Obesity: Pathogenesis, consequences, and approaches to treatment. *Psychiatr Clin North Am* 1994;7:307-319.
3. *Estimates P: Call obesity "a killer", costing the US \$30.6 billion a year.* *Medical Industry* 1992;March 20:26.

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*Preferred by physicians over
other well-known anorectics.¹*

Brief Summary

Indicated only for use as a short-term adjunct in the management of exogenous obesity.

INDICATION: FASTIN is indicated in the management of exogenous obesity as a short-term (a few weeks) adjunct in a regimen of weight reduction based on caloric restriction. The limited usefulness of agents of this class (see ACTIONS) should be measured against possible risk factors inherent in their use such as those described below.

CONTRAINDICATIONS: Advanced arteriosclerosis, symptomatic cardiovascular disease, moderate to severe hypertension, hyperthyroidism, known hypersensitivity or idiosyncrasy to the sympathomimetic amines, glaucoma.

Agitated states: Patients with a history of drug abuse. During or within 14 days following the administration of monoamine oxidase inhibitors (hypertensive crises may result).

WARNINGS: Tolerance to the anorectic effect usually develops within a few weeks. When this occurs, the recommended dose should not be exceeded in an attempt to increase the effect; rather, the drug should be discontinued.

FASTIN may impair the ability of the patient to engage in potentially hazardous activities such as operating machinery or driving a motor vehicle; the patient should therefore be cautioned accordingly.

DRUG DEPENDENCE: FASTIN is related chemically and pharmacologically to the amphetamines. Amphetamines and related stimulant drugs have been extensively abused, and the possibility of abuse of FASTIN should be kept in mind when evaluating the desirability of including a drug as part of a weight reduction program. Abuse of amphetamines and related drugs may be associated with intense psychological dependence and severe social dysfunction. There are reports of patients who have increased the dosage to many times that recommended. Abrupt cessation following prolonged high dosage administration results in extreme fatigue and mental depression changes are also noted on the sleep EEG. Manifestations of chronic intoxication with anorectic drugs include severe dermatitis, marked insomnia, irritability, hyperactivity, and personality changes. The most severe manifestation of chronic intoxications is psychosis, often clinically indistinguishable from schizophrenia.

Use in Pregnancy: Safe use in pregnancy has not been established. Use of FASTIN by women who are or who may become pregnant, and those in the first trimester of pregnancy, requires that the potential benefit be weighed against the possible hazard to mother and infant.

Use in Children: FASTIN is not recommended for use in children under 12 years of age.

Use with Alcohol: Concurrent use of alcohol with FASTIN may result in an adverse drug interaction.

PRECAUTIONS: Caution is to be exercised in prescribing FASTIN for patients with even mild hypertension.

Insulin requirements in diabetes mellitus may be altered in association with the use of FASTIN and the concomitant dietary regimen.

FASTIN may decrease the hypotensive effect of guanethidine.

The least amount feasible should be prescribed or dispensed at one time in order to minimize the possibility of overdose.

ADVERSE REACTIONS: Cardiovascular: Palpitation, tachycardia, elevation of blood pressure.

Central Nervous System: Overstimulation, restlessness, dizziness, insomnia, euphoria, dysphoria, tremor, headache, rarely psychotic episodes at recommended doses.

Gastrointestinal: Dryness of the mouth, unpleasant taste, diarrhea, constipation, other gastrointestinal disturbances.

Allergic: Urticaria.

Endocrine: Impotence, changes in libido.

DOSEAGE AND ADMINISTRATION: Exogenous Obesity: One capsule at approximately 2 hours after breakfast for appetite control. Late evening medication should be avoided because of the possibility of resulting insomnia.

Administration of one capsule (30 mg) daily has been found to be adequate in depression of the appetite for twelve to fourteen hours.

FASTIN is not recommended for use in children under 12 years of age.

OVERDOSEAGE: Manifestations of acute overdose with phentermine include restlessness, tremor, hyperreflexia, rapid respiration, confusion, assaultiveness, hallucinations, panic states, fatigue and depression usually follow the central stimulation. Cardiovascular effects include arrhythmias, hypertension or hypotension, and circulatory collapse. Gastrointestinal symptoms include nausea, vomiting, diarrhea, and abdominal cramps. Fatal poisoning usually terminates in convulsions and coma.

Management of acute phentermine intoxication is largely symptomatic and includes lavage and sedation with a barbiturate. Experience with hemodialysis or peritoneal dialysis is inadequate to permit recommendations in this regard. Acidification of the urine increases phentermine excretion. Intravenous phenelamine (REGIMIN) has been suggested for possible acute, severe hypertension; of this complicates phentermine overdose.

CAUTION: Federal law prohibits dispensing without prescription.

HOW SUPPLIED: Blue and clear capsules with blue and white beads containing 30 mg phentermine hydrochloride (equivalent to 24 mg phentermine).

NDC 0029-2205-30

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Dr. Vinn Installed As OPSC President

Norman E. Vinn, D.O., of Long Beach, California, was installed in late February as president of the Osteopathic Physicians and Surgeons of California (OPSC) during their annual meeting in Monterey, California.

Dr. Vinn is the son of J. Edward Vinn, D.O. of Houston, who practiced there until his death in 1985. The late Dr. Vinn was one of the first interns at Sparks Hospital in Dallas.

Dr. Norman Vinn graduated from PCOM in 1977, with his father having graduated from PCOM in 1940. At the 1977 PCOM graduation ceremonies, George J. Luibel, D.O., at that time president of the AOA and who remains a good friend of the Vinn family, delivered the commencement address.

After interning at Zeiger-Botsford Hospitals in Detroit, Michigan, Dr. Norman Vinn began practicing in Long Beach, where he is now president of Naples Medical Group. In 1987, he earned certification in general practice.

He is married to the former Marsha Daniels of Detroit. They have two daughters, Vanessa, age five and Danielle, age two.

Dr. Vinn's mother, Catherine Vinn, of Houston, was president of the Auxiliary to TOMA from 1959-60. ■

Older Patient's Wish

The Illinois Association of Osteopathic Physicians and Surgeons reports that most older patients who have been hospitalized in intensive care would be willing to undergo such care again, even if it prolonged their lives only for a month, according to a new study. The patients' preference appeared to hold true regardless of quality of life expectancy, age, severity of illness, length of stay or cost of intensive care.

Families surveyed on behalf of patients who have died or been left incompetent after intensive care treatment felt the same way, indicating the feeling did not depend on successful treatment, the authors of the study said. A co-author of the study said the findings contradicted the prevailing societal and medical assumption that most patients would want to be able to expect good quality of life before accepting intensive medical life-support. ■

Sustainer's Speakeasy

TOMA sustaining members attending the annual Sustainer's Party at this year's convention will have to knock three times on the door to gain entry to the Sustainer's Speakeasy. Once inside, the "roaring twenties" will prevail, with shifty gangsters, their molls and those shameless flappers. Of course, no legitimate illegal speakeasy would be complete without a casino, so there will be plenty of action at this event.

As usual, this speakeasy is for the sustaining mob and their molls only, and is a "thank you" type of event for those gangsters who contribute an additional \$100 or \$150 with their usual membership dues to the mob big boss (TOMA). No questions asked as to how the money is obtained!

For those who would like to be able to get into the sustaining speakeasy, the code word is sustaining member. Why not consider mailing us your check for either \$100 (sustaining) or \$150 (sustaining plus) PRIOR to the mob

gathering. Or, if you prefer, tack it on to your mob membership dues if you have not paid yet.

The sustaining mob will also have their annual chance to win a fully prepared black Angus steer, ready and waiting to be packed into your ice box. The steer has been donated by Bob Finch, D.O., of Dallas, owner of the Black Champ Farm, in memory of his partner and friend, the late Robert G. Haman, D.O., who actually began the Sustaining Membership Program in the early 1970's. The steer will be awarded during the sustainer's speakeasy.

We urge you to start digging through old trunks in attics and come to this speakeasy dressed in "roaring twenties" style. No gang wars or raids are anticipated.

Incidentally, beware of the bathtub gin which will be on hand at the speakeasy — it packs a real punch!

Remember the code word and don't forget — three knocks for entrance. ■

Texas Osteopathic Medical Association

SUSTAINING MEMBERSHIP APPLICATION



Name _____ District _____

Office Address _____ Phone _____

☐ Check Enclosed

☐ Bill Me

_____ I hereby elect to become a Sustaining Member of TOMA and authorize you to increase my dues billing \$100 annually

_____ I hereby elect to become a Sustaining Plus Member and authorize you to increase my dues billing \$150 annually

Date _____ Signed _____

AOA President to Address TOMA House of Delegates' Meeting



Marcelino Oliva, D.O., FACGP, President of the American Osteopathic Association, will be a guest speaker during the April 26 meeting of the TOMA House of Delegates in Arlington.

Dr. Oliva is a Dade City, Florida, general practitioner. A leader in Florida's medical community, he has held numerous state and national posts. He served on the Advisory Panel on Physician Reimbursement Issues by appointment of the Administrator of the Health Care Financing Administration in 1983; Advisory Committee of the Health Policy Agenda for the American People in 1983; and the Florida Constitution Revision Commission from 1977-78. He also served on the Board of Osteopathic Medical Examiners in 1979, Florida Medicaid Advisory Council from 1970-72, and Board of Trustees for Pasco-Hernando Community College from 1972-74, all by appointment of the Governor of Florida.

Prior to his election to the presidency of the AOA, Dr. Oliva was president-elect. Other AOA posts include second vice-president and three terms on the AOA Board

of Trustees. Dr. Oliva has been vice-chairman of the AOA Council on Federal Health Programs and chairman of the AOA Department of Governmental Affairs; Bureau of Public Education on Health; and Committee on Health Related Policies.

He is a member of the Florida Osteopathic Medical Association (FOMA), where he has served as president, trustee and officer. He received the Distinguished Service Award from FOMA in 1978.

Dr. Oliva received his D.O. degree in 1964 from the Kansas City College of Osteopathy and Surgery. He is a Diplomate of the American Osteopathic Board of General Practice and has been named a Fellow of the American College of General Practitioners in Osteopathic Medicine and Surgery.

Past chief-of-staff of East Pasco Medical Center, Dade City, Dr. Oliva has also been appointed a member of the Executive Committee of Humana Pasco Hospital. He serves as medical consultant for the athletic department and student health center of St. Leo, Florida. He is trustee of Southeastern College of Osteopathic Medicine, North Miami Beach, Florida.

ICD-9-CM Diagnostic Coding, Required

Your attention is called to *Physicians Medicare Newsletter* 270, dated January 12 and directed to all Medicare Part B physicians approved as Medicare providers of service.

The Medicare Catastrophic Coverage Act of 1988 requires physicians to include a diagnostic code (or codes) on each request for payment for services rendered beginning April 1, 1989. (Although this will not be enforced until June 1, TOMA recommends you begin using the codes as soon as possible.)

The Health Care Financing Administration has adopted a single diagnostic coding system. This coding system for diagnosis is the International Classification of Diseases, Ninth Edition, Clinical Modification (ICD-9-CM). This coding system will be used regardless of the setting in which the services are rendered.

In addition to claims submitted on the 1500 claim form, the instructions contained in this newsletter also apply to bills or statements from physicians which are submitted by beneficiaries with form HCFA-1490S.

The official version of the ICD-9-CM is published by the Government Printing Office (GPO). The coding books come as a three-volume set and can be purchased from GPO as follows:

| Edition | 1988 Price | Stock Number |
|------------------------------|------------|----------------|
| Three-volume paperback | \$29.00 | 017-022-007154 |
| Three-volume hard cover | 40.00 | 017-022-007142 |
| Official authorized addendum | 3.75 | 017-060-002417 |
| HIV infection codes | 1.00 | 017-022-010451 |

The GPO address is: U.S. Government Printing Office, Superintendent of Documents, Washington, D.C. 20402-9325. Phone 202/783-3238.

The newsletter gives the coding requirements, examples and the penalty for not reporting the diagnosis codes. Anyone needing a copy of this particular newsletter can contact TOMA.

Treat your income the same way you treat your patients.

Medical school probably covered everything except what to do for severe paralysis of the paycheck.

And that condition is more common than you might think. If you're 45 now, you have a 38 percent chance of becoming disabled for three months or longer before you reach retirement. And if you're 35, your chance of disability could be as high as 45 percent.* Without disability insurance, that's a 45 percent chance that your income will wind up in critical condition.

Get intensive care for your cash flow.

Should disability strike, how long could you keep your home? make the payments on your car? keep up your membership at the club? Provident disability protection is the perfect prescription, offering full coverage in your own occupation. That means Provident pays if you can no longer work in your own medical specialty regardless of how much you can earn working in a new career or a new specialty.

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Endorsed by the Texas Osteopathic Medical Association, your Provident disability plan offers TOMA members a 10 percent

discount for monthly payment or a 15 percent discount when you pay semi-annually or annually.

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*1985 Commissioners' Individual Disability Table A, 7-day Continuance Table.

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House of Delegates to Vote on Proposed Bylaw Changes

ARTICLE II — Membership

CHANGE SECTION 1 TO READ:

Line 105 — SECTION 1 — There shall be nine classes of Membership: (a) Regular, (b) Student, (c) Sustaining, (d) Honorary, (e) Life, (f) Associate, (g) Non-resident Associate, (h) Retired, and (i) Affiliate.

(ADD) NEW SECTION 11 — Affiliate Membership

Line 224 — Affiliate Membership. Affiliate membership shall be granted by the Board of Trustees to any organization that supports the efforts of, and embraces the philosophy of osteopathic medicine. Affiliate members shall not be eligible to vote or to hold office.

RENUMBER REMAINING SECTIONS: Old Section 11 becomes Section 12 and Section 12 becomes Section 13.

ARTICLE III — Dues

(ADD) NEW SECTION 9

Line 261 — Affiliate members shall pay annual dues of seventy-five (\$75.00) annually.

RENUMBER REMAINING SECTIONS: Old Section 9 becomes Section 10; Section 10 becomes Section 11, etc.

ARTICLE V — Officers

SECTION 1

Line 369 — (CHANGE)

The words "President-Elect" and "Vice President" will be reversed in order to show the proper ascendancy to the Presidency should there be a vacancy in mid-term.

Line 372 — After the last word "installed," ADD:

or appointed to fill vacancies as provided by these bylaws.

SECTION 2

Line 376 — After the word (committee) ADD:

He shall be an ex-officio member of all departments and committees.

CHANGE SECTION 3 TO READ:

Line 377 — The President-Elect, in the absence of or at the request of the President, shall perform the duties of that office. In the case of incapacity of the President to continue in office, the President-Elect shall succeed to the office of President for the remainder of that term of office. The President-Elect shall ascend to the office of President at the time the other officers for the coming year are installed.

CHANGE SECTION 8 TO READ:

Line 405 — The Vice-President shall perform the duties of the President in the absence of the President and President-Elect.

(ADD) NEW SECTION 9

In the event any officer fails to perform the duties of his office as determined by a two-thirds vote of the certified voting members of the Board of

Trustees at any regular or special meeting, the Board of Trustees shall declare the office vacant and elect a successor to serve until the next annual meeting of the House of Delegates.

(ADD) NEW SECTION 10

In the event the President becomes disabled and unable to perform the duties of his office, but does not request the President-Elect to assume the duties of the President, it shall be the prerogative of the Board of Trustees to declare the President disabled and request the President-Elect to assume the duties of the President. Such action can only be taken by a two-thirds vote of a quorum of Board members present and voting.

(ADD) NEW SECTION 11

A vacancy occurring on the Board of Trustees shall be filled by appointment by the Board with the approval of the majority of the remaining Board of Trustees. The successor shall serve until the next annual meeting of the House of Delegates. The House of Delegates shall fill the remainder of the unexpired term by a majority vote.

(ADD) NEW SECTION 12

When an officer fails to attend two (2) consecutive meetings of the Board of Trustees, without proper cause, then the seat may be declared vacant by a majority of the quorum voting of the Board of Trustees and the vacancy filled by the Board until the next annual meeting of the House of Delegates.

ARTICLE VII — Board of Trustees

(ADD) NEW SECTION 12

Line 513 — When a member of the Board of Trustees fails to attend two (2) consecutive meetings of the Board of Trustees, without proper cause, then the seat may be declared vacant by a two-thirds majority of the quorum voting of the Board of Trustees and the vacancy filled by the Board until the next annual meeting of the House of Delegates.

(ADD) NEW SECTION 13

A vacancy occurring on the Board of Trustees by resignation, death, or disablement shall be filled by Presidential appointment with the approval of the majority of remaining Board of Trustees. The successor shall serve until the next annual meeting of the House of Delegates. The House of Delegates shall fill the remainder of the unexpired term by a majority vote.

ARTICLE XII — Departments and Committees

(ADD) NEW SECTION 5

The President shall be an ex-officio member of all departments and committees.

Convention Supporters '89

Exhibitors

ACS/Professional Systems
Abbott Laboratories
Adria Laboratories
ACGP, Texas Society of
Becton Dickinson Primary Care Diagnosis
BioAnalogs, Inc.
Boehringer Ingelheim, Ltd.
Boots/Flint Laboratories
Brentwood Instruments, Inc.
Bristol Laboratories
Burroughs Wellcome Company
Carrick Laboratories, Inc.
Control-O-Fax
Cross Medical Instruments
Curaflex Health Care Services
William H. Dean & Associates
Dista Products Company
Doctors Hospital-Groves
DuPont Pharmaceuticals
Durr Fillauer
Eli Lilly and Company
Environmental Health Center
Geigy Pharmaceuticals
Glaxo, Inc.
Health Care of Texas, Inc.
Hemo-Dynamics
Hoechst-Roussel Pharmaceuticals, Inc.
ICI Pharma/Stuart Pharmaceuticals
International Medical Electronics, Ltd.
InVitro Diagnostics
Janssen Pharmaceutical
Key Pharmaceuticals
Kirkville College of Osteopathic Medicine
Knoll Pharmaceuticals
Lanpar Company
Lederle Laboratories
Marion Laboratories
McNeil Consumer Products Company
McNeil Pharmaceutical
Mead Johnson Pharmaceuticals
Medi-Quip
Merrell-Dow Pharmaceuticals
Miles Inc., Pharmaceutical Division
Muro Pharmaceutical, Inc.
Myo-Tech
National Heritage Insurance Company
NewMed Corporation
Nordisk-USA

Ortho Pharmaceuticals
Parke-Davis
Pfizer, Inc.
Princeton Pharmaceutical Products
Professional Mutual Insurance Company RRG
Purdue Frederick
R-B Instruments
3-M Riker
A.H. Robins Company
Roerig
Rorer Pharmaceuticals
Ross Laboratories
W. B. Saunders Company
Savage Laboratories
Schering Corporation
Searle Pharmaceuticals
Smith, Kline & French
Squibb Novo
E. R. Squibb & Sons
Stuart Pharmaceuticals
Syntex Laboratories
TEI Computers
Texas College of Osteopathic Medicine
Texas State Board of Medical Examiners
UAD Laboratories
Universal Liability
Upjohn Company
U.S. Army Health Professional Support Agency
U.S. Navy Recruiting District — Dallas
Westwood Pharmaceuticals
Wyeth-Ayerst Laboratories
X-Ray Sales & Service Company

Educational Grantors

Boots/Flint Laboratories
Mead Johnson
Merrell-Dow
Ortho Pharmaceuticals
Pfizer Laboratories
A. H. Robins
The Upjohn Company

Grantors

Marion Laboratories
TOMA District XV
TCOM Foundation

T. O. M. A. PRESIDENTS

FOUNDED NOVEMBER 29, 1900, IN SHERMAN BY FIVE OSTEOPATHIC PHYSICIANS, THE TEXAS OSTEOPATHIC MEDICAL ASSOCIATION STRIVES TO IMPROVE THE PUBLIC HEALTH WHILE MAINTAINING HIGH STANDARDS OF OSTEOPATHIC CARE; PROMOTES RESEARCH; PROMOTES THE OSTEOPATHIC PHILOSOPHY; AND ENSURES THAT TEXANS HAVE AN ALTERNATE CHOICE WHEN SELECTING A PHYSICIAN FOR THEIR HEALTH CARE NEEDS.

THIS PICTORIAL DISPLAY OF PAST TOMA PRESIDENTS SERVES TO HONOR THE MEMORY OF THOSE WHO HAVE HELPED TO ENSURE THE SURVIVAL OF THE OSTEOPATHIC PROFESSION IN TEXAS, MOLDING AND DIRECTING THIS ASSOCIATION THROUGH THEIR RELENTLESS DEDICATION AND FIRM BELIEF IN ITS PRINCIPLES, FROM ITS BIRTH AND ADOLESCENCE INTO ONGOING MATURITY.

The Archives Committee of the Texas Osteopathic Medical Association is pleased to report that work on the memorial plaque honoring past presidents of the Association is progressing at a good pace and has now been assembled.

This project was decided upon several years ago by the Board of Trustees and has been worked on under the guidance of the TOMA Archives Committee, who have decided that enough photos are now available to begin assembly.

This pictorial display is designed to honor those who have helped to ensure the survival of the osteopathic profession in Texas. We feel it is a very fitting tribute and urge all members to drop by the State Office and get a look at it, or take the opportunity during the annual convention to see it.

Donated by William H. Dean & Associates — "Country" and "Lake"



D. L. CLARK, D.O.
1900 - 01



THOMAS L. RAYDO,
1901 - 02



PAUL M. PECK, D.O.
1904 - 05



A. D. RAYDO,
1905 - 06



JAMES L. HOLLOWAY,
1906 - 07



R. R. NORWOOD,
1909 - 10



SAM L. SCOTHERN, D.O.
1912 - 13



JOHN S. CRAWFORD, D.O.
1914 - 15



H. M. WALKER, D.O.
1915 - 16



DAVIS S. HARRIS, D.O.
1917 - 18



D. W. DAVIS, D.O.
1918 - 19



PHIL R. RUSSELL, D.O.
1923 - 24



H. B. MASON, D.O.
1924 - 25



CHARLES F. KENNEY, D.O.
1927 - 28



R. H. PETERSON, D.O.
1930 - 31



LOUIS H. LOGANDO,
1933 - 34



TED R. KROHN, D.O.
1937 - 38



HOWARD R. COATS, D.O.
1939 - 40



LESTER J. VICK, D.O.
1941 - 42



MARILE E. EDWARDS, D.O.
1942 - 43



REGINALD PLATOFF, D.O.
1943 - 44



JOSEPH L. LOVE, D.O.
1944 - 46



ROBERT E. MORGAN, D.O.
1946 - 47



J. FRANCIS BRONN, D.O.
1947 - 48



H. GEORGE GRANGER, D.O.
1948 - 49



LIGE C. EDWARDS, D.O.
1949 - 50



GEORGE J. LUBEL, D.O.
1950 - 51



SAMUEL F. SPARKS, D.O.
1951 - 52



ELMER C. BAUM, D.O.
1952 - 53



MERLE GRIFFIN, D.O.
1953 - 54



A. L. GARRISON, D.O.
1954 - 55



WAYNE M. SMITH, D.D.
1955 - 56



JOHN L. WITTO, D.D.
1956 - 57



LESTER I. TAVEL, D.D.
1957 - 58



MICKE G. HOLCOMB, D.D.
1958 - 59



RAYMOND D. FISHER, D.D.
1959 - 60



GLENN R. SCOTT, D.D.
1960 - 61



G. W. THOMPSON, D.D.
1961 - 62



L. G. BALLARD, D.D.
1962 - 63



LOREN R. ROHR, D.D.
1963 - 64



J. WARREN MCCORMICK, D.D.
1964 - 65



JOHN H. BURNETT, D.D.
1965 - 66



FRED E. LOGAN, SR., D.D.
1966 - 67



WILEY B. ROUNTREE, D.D.
1967 - 68



ROBERT H. NOBLES, D.D.
1968 - 69



RICHARD L. STRATTON, D.D.
1969 - 70



BOBBY G. SMITH, D.D.
1970 - 71



RICHARD M. HALL, D.D.
1971 - 72



ROBERT G. HAMAN, D.D.
1972 - 73



JOHN H. BOYD, D.D.
1973 - 74



H. EUGENE BROWN, D.D.
1974 - 75



MICHAEL A. CALABRESE, D.D.
1975 - 76



DAVID R. ARMBRUSTER, D.D.
1976 - 77



SAMUEL B. GANZ, D.D.
1977 - 78



GERALD P. FLANAGAN, D.D.
1978 - 79



JOHN J. CEGELSKI, D.D.
1979 - 80



DWIGHT H. HAUSED, D.D.
1980 - 81



FRANK J. BRADLEY, D.D.
1981 - 82



WILLIAM R. JENKINS, D.D.
1982 - 83



ROBERT G. MAUL, D.D.
1983 - 84



ROYCE K. KEELERS, D.D.
1984 - 85



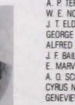
DONALD M. PETERSON, D.D.
1985 - 86



JEROME L. ARMBRUSTER, D.D.
1986 - 87



BILL H. PURYEAR, D.D.
1987 - 88



MERLIN L. SHRINER, D.D.
1988 - 89

T.O.M.A. PAST PRESIDENTS NOT PICTURED

E. C. LINK, D.D. 1902-03
W. B. LOVING, D.D. 1903-04
A. P. TERRELL, D.D. 1907-08
W. E. MOONAN, D.D. 1908 - 09
J. T. ELDER, D.D. 1910-11
GEORGE A. COBB, D.D. 1911-12
ALFRED J. TARR, D.D. 1913-14
J. F. BAILEY, D.D. 1915-17
E. MARVIN BAILEY, D.D. 1919-20
A. O. SCHARF, D.D. 1920-21
CYRUS N. RAY, D.D. 1921-22
GENEVIEVE LAUGHLIN, D.D. 1922-23
WALTER S. SMITH, D.D. 1925-26
E. E. LARKIN, D.D. 1926-27
HENRY M. BOWERS, D.D. 1928-29
MARY E. PECK, D.D. 1929-30
MARY G. BEDWELL, D.D. 1931-32
WILLIAM RODDY, D.D. 1932-33
EVERETT W. WILSON, D.D. 1934-35
J. R. ALEXANDER, D.D. 1935-36
BEN E. HARMAN, D.D. 1936-37
CHESTER L. FARQUHARSON, D.D. 1938-39
ROY G. RUSSELL, D.D. 1940-41

SMILEY'S PHOTOGRAPHY
FT. WORTH, TEXAS 76101

AOA President-Elect to Speak at AOA Luncheon During TOMA Convention



AOA President-elect William H. Voss, D.O., FACOI, a Jefferson City, Missouri, internist, will be guest speaker at the AOA Luncheon, Friday, April 28, during the TOMA annual convention.

Dr. Voss is on the staff of Charles E. Still Osteopathic Hospital in Jefferson City, where he received the Distinguished

Service Award in 1980. There he serves on the Department of Internal Medicine, as member of the teaching staff, member of the Long Range Planning Committee of the Board of Trustees, as chairman of the Department of Nuclear Medicine and as Director of the Alcohol/Drug Rehabilitation Unit. He also holds staff privileges at Hermann Area District Hospital, Hermann, Missouri, and at St. Mary's Health Center in Jefferson City.

Dr. Voss received his D.O. degree from Kirksville College of Osteopathic Medicine. He is a Diplomate of

the American Osteopathic Board of Internal Medicine, a fellow of the American College of Osteopathic Internists and holds certification in the Nuclear Medicine Institute of Cleveland, Ohio.

His AOA involvements, besides that of president-elect, include member of the Board of Trustees, Executive Committee, Finance Committee, Board Reference Committee and a member of the Missouri Delegation to the AOA House of Delegates.

An active member of the Missouri Association of Osteopathic Physicians and Surgeons, he is a past president and in 1983, was honored with the Missouri Osteopathic Physician of the Year award.

Other professional appointments include secretary treasurer of the American Association of Osteopathic Examiners, and the Missouri Task Force on Drug Diversion. Service and Social organizations include the American Legion, Knights of Columbus - Fourth Degree, and Cosmopolitan Club International.

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ANESTHESIOLOGY
Edmund F. Touma, D.O.

Mr. Olie Clem, Administrator
Tyler, Texas 75701

1400 West Southwest Loop 323

Phone: 214-561-3771

NEW!!!

TOMA Announces The Sponsorship of a New Group Major Medical Insurance Plan

At long last, a *quality* group major medical plan is available for members of TOMA and their families, and members' employees and families.

The new plan is provided by GALAXIA LIFE INSURANCE COMPANY — a leader in Association plans — with enrollment, marketing, and insurance services provided by WILLIAM H. DEAN AND ASSOCIATES.

William H. Dean and Associates are recognized statewide for their expertise in insurance and related matters. TOMA is fortunate to have the services of these two fine organizations.

Coverages available are:

- Major Medical Coverage with Maternity Benefits
Choice of deductibles: \$250 - \$500 - \$1000 - \$2500 - \$5000
- Optional Dental Coverage
- Optional Supplemental Accident Coverage

Those insured under previous TOMA plans can enroll in the new plan with no lapse in coverage.

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

WILLIAM H. DEAN & ASSOCIATES

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

(817) 429-0460
Dallas/Fort Worth Metro

Osteopathic Hospital Board Members Re-Elected to Three-Year Terms

Gibson D. Lewis, Herman F. Stute, William M. Jordan, D.O., and John W. Burnam have been re-elected to the board of directors of Fort Worth Osteopathic Hospital, Inc. The board is the governing body of Fort Worth Osteopathic Medical Center.

They were elected on January 24 at the annual meeting of the Medical Center's corporate body. Each will serve a three-year term.

Gib Lewis is president of Lewis Label Products and currently serves as Speaker of the House of Representatives. In addition, he is an Advisory Director of Lake Worth National Bank.

Herman Stute owns The H.F. Stute Company and is president of Fort Worth Clean City, Inc. Stute served as city councilman for District 9 from 1979 to 1985. During his tenure on the city council, Mr. Stute served two years as Mayor Pro Tem. Stute also is a past president of the Fort Worth Chapter of the Air Force Association.

Dr. William Jordan of Westside Medical Associates is a Medical Oncology specialist. Jordan also is a clinical

assistant professor of medicine at the Texas College of Osteopathic Medicine and a past Chief of Staff at Fort Worth Osteopathic Medical Center. Dr. Jordan presently is a member of the Investigational Work Group of the Legislative Cancer Task Force in Texas.

John Burnam is a vice president of Tandy Corporation. He is a member of the United States Chamber of Commerce, the Rotary Club of Fort Worth, the National Association of Manufacturers, and the YMCA Metropolitan Fort Worth.

Other members of the Fort Worth Osteopathic Medical Center Board are Jay E. Sandelin; David M. Beyer, D.O.; Randall L. Kressler; W. Scott Wysong III; Barclay Ryals; Charles T. Maxvill, D.O.; Jay G. Beckwith, D.O.; Harri F. Pearson, D.O.; Irwin Schussler, D.O.; and David M. Richards, D.O.

Fort Worth Osteopathic Medical Center is a general and acute care facility. The 265-bed Medical Center is the largest osteopathic hospital in Texas and serves as the primary teaching facility for the Texas College of Osteopathic Medicine. It is an affiliate of Health Care of Texas, Inc., of Fort Worth.

Sample Drug Rule Reviewed by Texas State Board of Medical Examiners

At the January 26, 1989 Standing Orders Committee of the Texas State Board of Medical Examiners (TSBME), testimony was provided, for a second time, concerning the provision of sample drugs by physicians. TOMA had requested that this rule be reviewed and that the definition of "immediate need" be modified. The current definition of "immediate need" for dispensing of free samples is "until the patient has access to a pharmacy." The interpretation of this rule means that the patient normally has access to a pharmacy in a rather short period of time (unless it's over a weekend or in situations where the patient is unable to get to a pharmacy through normal means). TOMA requested that the definition be expanded to include a long enough period for the physician to determine the efficacy of the drug before a prescription would have to be written. After testimony from the Texas Pharmacy Board, Texas Pharmaceutical Association, Texas Medical Association and TOMA, the Board reached a decision not to modify the existing rule.

Therefore, the current interpretation which allows physicians to only dispense free samples for the "immediate need" of the patient (until the patient can access a pharmacy) will continue to be the standard. While TOMA is on record as opposing this position, it is the current rule of the Texas State Board of Medical Examiners and must be complied with for physicians to be abiding by the law.



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TEXAS ACGP MEMBERSHIP

— We Want You —

As you know, there is truth in the adage which states that there is strength in numbers. Medicine is under siege from all sides by hostile forces. Now is the time for Texas DO-GP's to circle the wagons and to band together to achieve a common goal — the preservation of the private practice of osteopathic medicine.

Texas DO-GP's need a common voice to speak up for the special concerns of osteopathic general practitioners at the state and national level. The Texas Society of the ACGP is the DO-GP's voice at the state level. To whom and how loud these voices can speak for each of us depends on their total membership.

Total membership in the National ACGP also determines how much influence the Texas Society can exert through its delegates to the National Convention. This year we have 17 delegates to the National ACGP Convention, which is an increase of one delegate over last year. This year the National ACGP will have a President from the Texas Society of the ACGP, Dr. Royce Keilers of La Grange.

Many of our Texas DO-GP's may think that membership in the Texas Society is automatic if they are members of the American College of General Practitioners. This is not so, for membership in the Texas Society is separate, and not covered by membership dues in the National ACGP. What services does the \$75.00 dues money buy for Texas ACGP members? Each year the Texas ACGP offers an excellent mid-year seminar which is geared to common problems seen by DO-GP's in their office practice. Once again the meeting will be held at the Arlington Hilton on August 4 - 6, 1989. Speaking at this meeting will be the President-Elect of the National ACGP. Texas ACGP members receive a \$75.00 discount off the annual mid-year seminar registration fee, which is the cost of their Texas ACGP membership.

1989 will mark the 36th birthday of the Texas Society of the ACGP. Members will partake of our traditional breakfast-birthday celebration at the TOMA State Convention free of charge. The member in attendance with the most seniority gets to cut the cake.

Texas ACGP members get to submit nominations for the Texas GP of the Year Award which is presented annually at the TOMA State Convention.

The Texas Society of the ACGP is very active in monitoring Medicare and Medicaid problems, as well as other third-party payor problems that impact on DO-GP's. We support and encourage the expansion

of general practice residency and preceptee training programs in Texas. We support the Undergraduate Chapter (Zeta) of the ACGP at TCOM. The Zeta Chapter is the "gold" standard by which all other undergraduate chapters at osteopathic medical schools are compared.

Finally, the Texas ACGP is very active in encouraging and assisting its members to seek ACGPB certification. Certification is the yardstick by which physicians are measured. In order to take the Board, a physician must have been in practice six years, with over 50 percent in general practice; submit 600 hours of postgraduate study; and be a member in "good standing" of the National ACGP. A member in "good standing" must have attended at least one educational program sponsored by the National ACGP each three years and obtain 50 hours of National ACGP-approved CME annually. The mid-year seminar offers approximately 20 certified hours towards this yearly requirement.

Texas ACGP members pursuing certification in general practice are entitled to utilize study materials at the TCOM library which are updated periodically.

Annual dues for the Texas Society of the ACGP are as follows:

- First year — one-third of regular dues
- Second year — two thirds of regular dues
- Third year and thereafter — full amount, which is currently \$75.00.
- Active, academic or associate members who are serving in the uniformed services on active duty shall pay one-third of regular dues until tour of duty is completed.

Applications for membership in the Texas ACGP may be obtained by contacting:

Secretary-Treasurer of the Texas ACGP
T. R. Sharp, D.O., FACGP
4224 Gus Thomasson Road
Mesquite, Texas 75150,
or by phone at (214) 279-2453

Remember, the Texas ACGP and the National ACGP are two separate memberships, with separate dues structures.

Take the time to join with other Texas DO-GP's in promoting common goals and defending our unique philosophy of health care. We need you.

FYI

BIRTH-RELATED INJURY LEGISLATION

In an attempt to curtail the high cost of professional liability insurance, Virginia and Florida have passed legislation dealing with birth-related injuries.

Florida established a Neurologic Insurance Compensation Association (NICA). This new birth-related neurological injury compensation plan, which affects every doctor in Florida, is a no-fault plan that limits payment to the infant's actual health care expenses (both past and future) and reasonable expenses incurred in filing the claim. The maximum award is \$100,000 to patients for intangible damages such as pain and suffering. Each physician licensed in the state must remit an annual assessment. Participating physicians (those who are involved with deliveries — pediatricians, obstetricians, anesthesiologists) pay \$5,000; non-participating physicians pay \$250 and hospitals pay \$50 per live birth occurring during the previous calendar year.

The Virginia legislation, Virginia Birth-Related Neurological Injury Compensation Act, became effective January 1, 1988. Florida's legislation is effective for claims occurring on or after January 1, 1989. If you have a Virginia or Florida license, do not disregard the notice to pay your annual assessment — it is a condition to maintain your license.

CHAMPUS NEWS

When a physician or other individual health care provider is said to "participate in CHAMPUS" (also sometimes called "accepting assignment"), it means that he or

she: agrees to accept the amount CHAMPUS says is a reasonable (or "allowable") charge as his or her full fee for services rendered; must not ask the patient to pay the difference between the amount he or she bills and the CHAMPUS allowable charge; must bill the patient for all patient cost-shares and for the annual outpatient deductibles; must bill the patient for all services not covered by CHAMPUS; and generally files the claim for the patient.

When individual providers decide to participate in CHAMPUS, they must be sure to check "Yes" in Block 32 on the CHAMPUS claim form. And they must sign the form in Block 33 in order for payments to be mailed directly to the patient.

Generally, individual health care providers may participate or NOT participate in CHAMPUS on a claim-by-claim basis under the regular CHAMPUS program. There may be variations on this rule in some parts of the United States where CHAMPUS test programs are underway.

HARVARD RBRVS EXPANDED — WILL INCLUDE OMT

The Harvard resource-based relative value scale (RBRVS) is being expanded to include 15 additional specialties.

Under the direction of economist William Hsiao, the new project will measure total work, practice costs, and training costs for common procedures in the following specialty/subspecialty areas: physicians who specialize in osteopathic procedures, cardiology, emergency medicine, gastroenterology, hematology, infectious disease, nephrology, neurology, neurosurgery, nuclear

medicine, oncology, physical medicine and rehabilitation, plastic surgery, pulmonary medicine and radiation oncology.

To date, progress on this phase includes construction of clinical vignettes on which to base measurements of work; the review of those vignettes by technical consulting panels consisting of physicians specializing in each area to be surveyed; and development of a survey instrument to gather additional information on selected procedures.

APPLICATIONS TO NURSING SCHOOLS RISE

The number of students entering U.S. nursing schools rose 11 percent last year, after falling nearly 33 percent from 1983 to 1987, according to a survey of more than 220 schools across the nation. Schools responding to the annual survey, published by *Nursingworld Journal*, had 15,494 freshmen in 1988, up from 13,970 a year earlier.

The magazine's publisher, Richard A. DeVito, attributed the turnaround primarily to rising salaries and plentiful job opportunities. "Probably the most important thing is that there has been so much publicity about the national shortage of nurses," he said.

But a more troubling factor, DeVito said, is that many schools have reduced minimum entry-level grade-point averages to attract more applicants. Perhaps as a result, he said, graduate nurses failed their licensing exams at a record rate of 16 percent in 1988, four times the level of 1987.

TMA PURCHASES PROPERTY FOR NEW HEADQUARTERS BUILDING

Late last year, the Texas Medical Association (TMA) purchased the half block of land on West 15th Street bounded by Guadalupe and San Antonio Streets, Austin, and is developing plans to construct a new Association headquarters building on this site. Selection of the site culminated a two-year search for appropriate location.

The Association presently has offices in separate buildings on the southeast and northeast corners of North Lamar and Martin Luther King, Jr., Boulevards in Austin. The main building at North Lamar was built in 1953.

Plans call for construction of a mid-rise, 120,000 square foot office building, plus parking facilities. Construction is scheduled to begin this summer with occupancy in the fall of 1990.

NATIONAL PRACTITIONER DATA BANK CONTRACT AWARDED

Unisys Corp., an information systems firm based in Pennsylvania, has been awarded a \$15.9 million, five-year contract to operate the national practitioner data bank. Authorized by the Health Care Quality Improvement Act of 1986 and the Medicare and Medicaid Patient and Program Protection Act of 1987, the data bank is scheduled to become operational by this summer. It will list information

from that time onward with no retroactive reporting.

Collected by the data bank will be information on physicians, dentists and other healthcare practitioners to ensure that they cannot move their practices to other states if they have been discovered to practice in a substandard manner. Data collected will include malpractice claims or settlement payments, licensure disciplinary actions, professional review actions by health care entities with peer review processes, and adverse actions taken by professional societies against physicians' membership after formal peer review of the practitioner's professional competence or conduct.

Additionally, hospitals will have to consult the data bank when a practitioner tries to join the staff or seeks clinical privileges, and every two years, investigation must be done on those already on staff or those with clinical privileges.

COM-OSU HONOR LIST RELEASED

Anthony Lee "Tony" Tisdale, son of Dr. and Mrs. Duane Tisdale of Victoria, Texas has been listed on the Dean's List for Academic Excellence for the 1989 fall semester at the College of Osteopathic Medicine of Oklahoma State University (COM-OSU), where he is in his sophomore year.

COM-OSU students must achieve a grade point average of 3.25 on a 4.0 scale, and have no grades of "C" or below to be included on the Dean's List.

TOMA member Dr. Duane Tisdale is a general practitioner in Victoria.

DR. HALL INDUCTED AS FELLOW IN NATIONAL ACGP

Richard M. Hall, D.O., of Eden, Texas, was one of seven D.O.s inducted as new Fellows by the American College of General Practitioners in Osteopathic Medicine and Surgery. The event took place at the ACGP banquet on December 7, during the AOA Convention in Las Vegas, Nevada.

Congratulations to Dr. Hall!

TCOM PRESIDENT ELECTED TO ADVISORY BOARD OF SALVATION ARMY

David M. Richards, D.O. president of Texas College of Osteopathic Medicine has been elected to the Tarrant County Advisory Board of The Salvation Army.

Dr. Richards joined TCOM in 1981 and was appointed interim president in June of 1985. He was elected president in 1986. He is a member of the AOA's Committee on Colleges, chairman-elect of the American Association of Colleges of Osteopathic Medicine and is serving a four year term on the Special Medical Advisory Group to the Veteran's Administration.

Additionally, Dr. Richards is a member of the boards of directors of Fort Worth Osteopathic Hospital, Inc. and the Fort Worth Chamber of Commerce.



Revised Guidelines for the 1989-91 AOA CME Cycle

As of January 1989, another AOA CME cycle began. The policies were revised as follows:

*Simplification of CME Recording System

Category 1 and Category 2 of the CME program have been revised to reduce the number of subcategories. The comparison chart details the changes between the 1986-88 and 1989-91 AOA CME three-year cycles.

*Requirements

Physicians who are board certified or board eligible must earn a minimum of 50 credit hours or more as may be mandated by the Board of their primary specialty in each 3-year CME period. These hours may be earned in Category 1 or Category 2. Failure to maintain this requirement will result in loss of certification or board eligibility.

*Exemption

Life Members and Honorary Life Members are no longer exempt from the AOA CME program.

AOA members serving in the military will be exempt from the 50 hours specialty requirement when assigned to positions other than their specialty.

*Other Osteopathic CME

Credit may be granted in Category 1-B for audio and video taped programs when osteopathically sponsored.

Credit will be awarded at the rate of one credit per hour of program playing time if an accompanying CME quiz is completed and returned to the AOA. Also, credit may be granted for computer assisted instruction, and credit will be awarded at the rate of one-half credit per hour of time spent in completion of the program, if sponsor generated documentation of the number of hours and the program's completion is received by the AOA.

Category 1-B may be granted for osteopathically sponsored quality assurance and risk management seminars.

*Category 2-B

For audio and video taped programs, credit will be awarded at the rate of one credit per hour of program playing time if an accompanying CME quiz is completed and returned to the AOA.

Physicians are encouraged to obtain CME credit in an AIDS related program.

Any questions about the AOA CME program should be directed to the AOA Division of Continuing Medical Education at 1-800-621-1773.

American Osteopathic Association Comparison of CME Requirements Three Year Cycles 1986-1988 and 1989-1991

Total Requirements:

Maximum of 150 credits per
3-year period

Credit Limits Per 3-Year Period

Not Applicable 50 credits
must be in the
primary specialty

CME CONTENT BY CATEGORY

| 1986 - 1988 | 1989 - 1991 | | 1986 - 1988 | 1989 - 1991 |
|-------------|-------------|--|-------------|-------------|
| 1-A | 1-A | Category 1 — Minimum of 60 hours formal education programs sponsored by recognized osteopathic institutions, organizations, and their affiliates which meet the definition of "osteopathic" CME. | No Limit | No Limit |
| 1-B | 1-B | Development and publication of scientific papers and electronically communicate programs. | No Limit | 90 Hours |
| 1-C | 1-B | Osteopathic medical teaching. | 45 Hours | 90 Hours |
| 1-D | 1-B | Conducting osteopathic hospital inspections and certifying board examinations (5 credits per inspection or examination). | 30 hours | 90 Hours |
| 1-E | 1-B | AOA-accredited and/or approved hospital committee and departmental conferences concerned with the review and evaluation of patient care. | 60 Hours | 90 Hours |
| 1-F | 1-B | Other CME activities and programs approved for Category 1 credit by AOA Committee on Continuing Medical Education. | 30 Hours | 90 Hours |
| 2-D | 2-A | Category 2 — Maximum of 90 hours followed formal education programs sponsored by recognized institutions, organizations and agencies. | 90 Hours | 90 Hours |
| 2-A | 2-B | NonAOA accredited and/or approved hospital committee and departmental conferences concerned with the review of patient care. | | |
| 2-B | 2-B | Home Study. | 90 Hours | 90 Hours |
| 2-C | 2-B | Scientific Exhibits. | 30 Hours | 90 Hours |
| 2-E | 2-B | Other CME activities and programs approved for Category 2 credit by AOA Committee on Continuing Medical Education. | | |

UPDATE ON RESPIRATORY TRACT INFECTIONS

**Fairmont Hotel, Dallas, Texas
March 29, 1989**

Wednesday, March 29, 1989

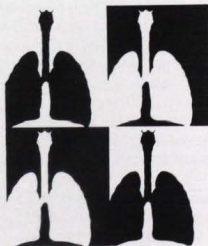
- 12:00 p.m. Registration
- 1:00 Opening
 David Ostransky, D.O.
- 1:15 Approach to Diagnosis of Pneumonias
 David Ostransky, D.O.
- 2:00 Atypical Pneumonias
 George A. Sarosi, M.D.
- 2:45 Pneumonias in the Elderly
 Francis X. Blais D.O.
- 4:00 Gram Negative Pneumonias
 James R. Tillotson, M.D.
- 4:45 Infections in COPD Patients
 Donald G. Burns, D.O.
- 5:30 Pediatric Pneumonias
 Richard B. Silver, M.D.
- 6:15 Banquet

Program Chairman

David Ostransky, D.O.
Department of Medicine
Texas College of Osteopathic Medicine
3500 Camp Bowie Boulevard
Fort Worth, Texas 76107-2690
817/735-2333

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When the Doctor Dies

By Katye Kowierschke

In May 1985 I became a doctor's widow.

In March 1988 I am still coping with the unique details of closing the doors on a doctor's life.

Three years ago, armed only with limited subliminal widow training but knowing I needed more, I contacted The Texas Medical Association (TMA) for help. Within two days, a rather lengthy packet arrived. The material, however, was geared to a retiring physician or one moving his practice to another site.

Although death certainly changes a doctor's address, it also removes him/her physically as a source of information, so I was still left with unanswered questions. Ultimately, with the help of the TMA staff and close medical friends, I managed.

Will your spouse be able to do the same?

Every year approximately 150 Texas physicians die, leaving roughly 150 medical spouses. Since there is no simple guideline available to help prepare them for widowhood, perhaps the following 12 points will aid you in preparing your spouse for that possibility:

1. Make sure your will is current and meets the legal requirements set by both state and federal regulations.

2. Be sure your spouse knows where your will is, is aware of its provisions, especially if there is any reference to your practice, and is well acquainted with your attorney.

3. If your spouse is not the executor/executrix of your estate, be sure he/she has a good working relationship with whoever is. Also, explain to your family who controls your estate during and after probate. If someone other than the family is responsible for patient records, see that that person gets them as soon as possible.

4. Tell a close friend to call either your attorney or executor immediately after your death, and arrange to have all calls (other than those from people wishing to express sympathy) directed to that person. Since all doctors are perceived as being rich, a doctor's widow is perceived as being richer. As soon as a physician's obituary appears, open season is declared on his/her assets.

Two financial scams were attempted on me within the first weeks after my husband, Sidney, died. A man who was suing us said he was certain I would not want my husband's memory tarnished over past conflicts, so for \$10,000 he would drop the suit and forget old offenses.

And, a "friend" called to say Sidney had promised him and his wife \$5,000 to buy a new car, and he knew I would want to honor Sidney's intent.

Both attempts at fraud were averted by my lawyer, who also succeeded in winning the lawsuit.

5. Make certain your spouse knows your CPA and/or your tax consultant, because the working relationship between them will be as close as the ones between your executor/executrix and your attorney. Office personnel will have to be retained for a while, bills sent, and accounts paid.

6. Tell someone in your family where you keep your current narcotics licenses, your current license to practice medicine, and your triplicate prescription forms.

Also, tell that person to contact the Texas State Board of Medical Examiners (TSBME) as soon as possible after your death so they can instruct your family about returning the above documents. You need to make certain your family understands that the job of contacting the TSBME and following the board's directions is their responsibility and no one else's.

7. Tell your spouse whether you or your associates, if you belong to a group, pay the premiums for office overhead, disability, and malpractice insurance.

If you pay for these policies as an individual, refunds will be due on unused premiums. Checks will be sent within weeks after the companies have been notified of your demise.

8. Insist your spouse file a claim for any disability or office overhead you are entitled to, even if it's only one day. If you have coverage through the TMA, the amount paid will be three full months of disability payments plus payment for the month of the claim itself. (There are some variables, but they are clearly stated in the policy.) It would also be wise to check your current policies to see what benefits they contain so you can advise your family ahead of time.

I don't think my husband was aware he had the type of coverage that provided a terminal payment. If he did, he never mentioned it. Since he was only disabled five days, I wasn't going to file a claim. It was through the insistence of a close friend who had sat on the Committee on Association Insurance that I finally did.

9. Explain in great detail to your spouse how to dispose of your practice, including any drugs on hand. Be sure patient records and retention times are understood. This is important whether you are a solo practitioner, a partner, or a member of an association. And, of course, any contractual arrangements need to be known.

In our case, Sidney and his partner had a limited partnership contract between their respective Professional Associations. Both wives were thoroughly familiar with the arrangements. In retrospect, I would have insisted on different terms, but at least I knew what to expect.

10. Explain the value of your personal medical library and how to dispose of it. Also, what furniture and equipment in the practice needs to be sold, where to get appraisals, and where to sell it. If any equipment is leased, you need to designate it, so it can be returned to lessors.

11. Don't keep secrets about tax shelters you are involved in, your position in them, any bank accounts, or property you own. Thank God, Sidney shared all this with me or I would have lost thousands of dollars.

12. Discuss the possibility of death through the years. As situations change, alter your will; as laws change, be aware of their implications; as the marriage years lengthen, share it all.

There are dozens of other details you might discuss with your family that aren't unique to medicine. They're just things that will alleviate some of the confusion and take away many of the surprises.

Some of my biggest jolts, excluding the legal fees, were having to obtain an estate tax identification number, having to open an estate checking account, and the necessity

of running an advertisement in the local newspaper to advise debtors about making claims against the estate. I've also learned about burial benefits from Social Security and the Veterans Administration, appraisals and Letters of Testamentary. In addition, my battles with the Internal Revenue Service and the problems of storing records continue today.

Although Sidney's affairs were in order, the hundreds of little decisions to be made became so traumatic I soon found myself turning every molehill into a mountain. This might have been avoided if we'd taken the time to talk about the 12 items above.

But our lives were not geared toward death.

Death, after all, is depressing and certainly not a favorite topic. Dying isn't a subject to be bantered about the breakfast table or discussed on vacation.

Death is miserable and morbid but it eventually comes to every household, and in the case of the doctor, its ramifications go far into the future. ■

*Reprinted with permission — "Texas Medicine,"
Volume 85 January 1989*

Proposal for Uniform Licensure Exam In the Works

A controversial plan which would create a uniform exam for graduates of U.S. and foreign medical schools is being generated by a task force under the guidance of the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners (NBME). The FSMB administers the Federation Licensing Examination (FLEX), which is available to all applicants, foreign medical graduates (FMGs) included, while the NBME gives licensing exams to only U.S. medical graduates.

The plan calls for bits and pieces of both exams boiled together into a new one, to be given to all applicants for licensure. Such a change is being considered because the FMGs, who cannot take FSMB exams, claim discrimination in that the tests they take are more difficult. The General Accounting Office, directed by Congress, is studying the allegations of discrimination against FMGs and will have a report by May.

Although the task force says there is no discrimination involved, they feel it would be an opportune time to make the testing pathway easier, cut costs by eliminating duplication, and also present big changes such as computerized testing to assess clinical skills into the exam process. Both the FSMB and the NBME state

they have wanted a uniform licensure pathway for decades. If such a proposal is given the nod, it is anticipated to begin as early as 1991. It would take several more years to phase out the current exam process. However, the new exam would also have to be embraced by the 54 U.S. licensing authorities represented by the FSMB, who say that some medical boards want to keep the FLEX. Essential to the plan is also the okay by the NBME because the NBME complies FLEX.

Representatives of the task force include the AMA as well as the National Board of Osteopathic Medical Examiners. The AMA has been against such a plan in the past, however, they are willing to review it and it could be up for vote before its House of Delegates this year. The AOA is formally opposed to the plan, feeling there would ultimately be a chasm between D.O.s who utilize osteopathic principles and those who do not. The NBOME says there is no way they would drop their separate exam and merge with M.D.s.

Meanwhile, the NBME will review the proposal at the end of March and the FSMB, at its annual meeting in April, will outline the plan to licensing authorities. ■

In Memoriam

Hugo J. Ranelle, D.O.

Hugo J. Ranelle, D.O., of Fort Worth, passed away January 17, 1989 at a Fort Worth hospital. He was 77 years of age.

Funeral services were held January 20 at Greenwood Funeral Home, Fort Worth, with entombment in Greenwood Mausoleum. His obituary in the *Fort Worth Star-Telegram* read as follows:

"Dr. Ranelle was one of the members of our profession who helped establish the profession in Fort Worth," said Dr. Carl Everett, a longtime friend and fellow osteopathic physician. "He was one of the greatest contributors as far as the profession is concerned. Our profession owes him a lot."

Dr. Ranelle helped establish the Fort Worth Osteopathic Hospital in 1946 and was a former chief of staff at the hospital.

Dr. Roy Fisher, another longtime friend, called Dr. Ranelle "one of the founding stockholders of the Osteopathic Hospital."

"He had a big practice and was well liked," Dr. Fisher said. "He was a good family man and was a very astute businessman. He was quite a pillar... a good physician and good hospital supporter."

Dr. Ranelle was born in New York City and was a graduate of Mount Herman Prep School in Northfield, Massachusetts. He was a runner at the New York Stock Exchange when the crash hit in 1929, and it was there that he received the advice that changed his life. William Carlisle, an attorney and later the president of Standard Oil of New Jersey, told him to "go back to school and make something of your life."

He took the advice and in 1935, graduated from Oberlin College in Ohio. He entered Philadelphia College of Osteopathic Medicine from which he was graduated in 1940. In 1941, Dr. Ranelle moved to Fort Worth, where he was to become one of the early osteopathic physicians in the city.

It was through the Yellow Pages that he made the move, however, one son said. Some prominent Fort Worth men were in New York on business when one fell down and injured his back. It was in the middle of the night and the men turned to the Yellow Pages for help. They spotted Dr. Ranelle's name and called him. He treated the injured man, and they were impressed with him. They were so impressed that they invited him to Fort Worth. Later, they even sent him a plane ticket. Dr. Ranelle flew to the city and never returned to New York. Instead, he called his wife and told her to follow.

Those prominent residents of Fort Worth were Amon G. Carter, Sr., Harold Hough and Bert Honea, owners of the *Fort Worth Star-Telegram*. Hough was the one who slipped and hurt his back, and indirectly, the reason Dr. Ranelle became a Texan. They helped Dr. Ranelle establish an office and build a home in Haltom City. Dr. Ranelle had his practice about 40 years on East Belknap Street.

On Wednesday afternoons, a daughter-in-law, Linda Ranelle, said, Dr. Ranelle would visit with Hough and other friends downtown, "his old cronies," she said. That probably was as close to a hobby as Dr. Ranelle had. "His one hobby was medicine," one son said, "and taking care of people." It was at the office in Haltom City where his four sons became interested in medicine. "We lived in the house which adjoined his office," a son said, "and it wasn't unusual for him to bring a patient into the dining room and the table and introduce him."

Every morning, Dr. Ranelle would go to the hospital, and come back home later to see his patients. "We were introduced (to medicine) at an early age," the son said. Dr. Ranelle and his wife delivered babies at homes and in those days, sometimes received payment in the form of chickens, or some other similar payment.

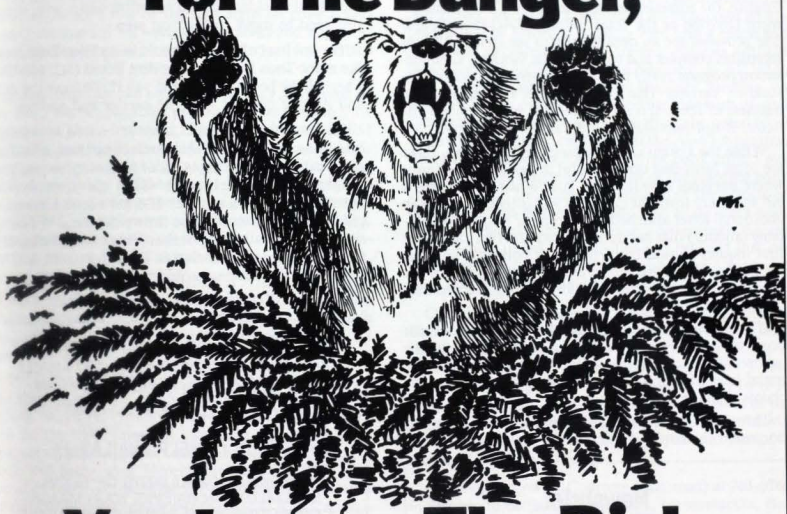
He was a past president and life member of TOMA, past president of Tarrant County Osteopathic Association and the Texas Society of General Practice. He was a trustee of TCOM and, in 1981, the library at Fort Worth Osteopathic Medical Center was dedicated in his honor. In 1985, Dr. Ranelle was recipient of a TCOM Founder's Medal for his contributions to medical education and health care. He was honored as one of the first physicians to establish osteopathic medicine in Fort Worth. In 1984, Dr. Ranelle retired from active practice.

The family suggests memorials be made to the Hugo J. Ranelle Library Fund at Fort Worth Osteopathic Medical Center.

Survivors include four sons, Dr. H. William Ranelle, Dr. Brian D. Ranelle and Dr. Robert G. Ranelle, all of Fort Worth, and Dr. John B. Ranelle of Wolf City; two sisters, Eleanor Constantino of Deer Park, Long Island, New York and Adele Emanuel of New Milford, New York; and six grandchildren.

TOMA extends its condolences to the Ranelle family.

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Hints on Dealing with Texas Industrial Accident Board — Worker's Compensation Cases

by Tom Hanstrom

Recently I had the opportunity to visit with Ellen English, the administrator of the Medical Cost Containment Division of the Texas Industrial Accident Board. She provided me an opportunity to see first hand how incredibly complex and confusing the Worker's Compensation program really is in Texas. There are over 600 insurance carriers that write worker's compensation business in Texas. It is no wonder that consistency is difficult, if not impossible, to obtain.

While the system can be extremely frustrating, there are some hints that can be useful in dealing with claims where payment is reduced or late. When you receive a bill summary from the carrier, it will oftentimes have an additional letter attached to it from the particular company (auditor) that has done the audit on that case. Your first inquiry should be to the audit company and not the carrier. If you are able to determine the name of the individual that conducted the audit, the best place to start is with that individual.

If the result of talking with that auditor does not prove satisfactory, the next level of inquiry is to the carrier. If the carrier gives you the runaround at the initial level of inquiry, you should ask to speak to the claims manager.

Throughout both of these steps, it is important to document the name of the person that you talk to and

the dates of your contact. This will enable the Texas Industrial Accident Board to better assist you, should you need to move to the next step.

The last level of inquiry should be to Ellen English's office at the Texas Industrial Accident Board (512/448-7974). They will be best able to assist you if you have the name and date of contact with the carrier and auditor.

Ellen's office personnel seem interested in resolving questions and I believe that contacting them will oftentimes alleviate your problem or at least give you good insight into the rules under which the program must operate. There are a number of other useful hints which can be used to assure more timely payment in unusual situations. I would suggest that you contact the Medical Cost Containment Division at Texas Industrial Accident Board and discuss any problems that you might be having with them.

Newsbrief

NEWS FROM THE MAOP&S

The Michigan Association of Osteopathic Physicians and Surgeons (MAOP&S) reports that Mr. William E. Stevenson has assumed the position of Executive Director of that association. Mr. Stevenson had been affiliated with Blue Cross and Blue Shield of Michigan since 1962. Since 1985, he served as senior vice president of External Affairs.

The challenges of the position are motivational to Mr. Stevenson. He intends to travel extensively throughout the state, serving as communications liaison between component societies, hospitals, MSU/COM and the MAOP&S Board. His background in health care provides the insight needed to focus on legislative and community issues that directly affect the osteopathic profession in Michigan.

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ATOMA NEWS

By Nancy Martin
Public Relations Chairman
ATOMA District II

Spring is almost upon us, and it is like a breath of fresh air to see some of the new signs of growth and beauty around us! We welcome you folks and hope you enjoy reading more interesting and informative news this month.

If you didn't see the ad in the February 1989 issue of the Fort Worth magazine put out by the Chamber of Commerce, please look for it! The February issue focused on health, and our District II ATOMA placed an ad. This ad showed a picture of the cover of the safety coloring book developed by ATOMA called *Smart Kids, Safe Kids — Aware Not Afraid*, and in the ad it stated that District II ATOMA is dedicated to promoting child safety, donating to osteopathic medical scholarships and supporting local children's charities.

Also, Rosie Guevara of District II ATOMA has completed a Spanish translation of the safety coloring book, and it is hoped to have the coloring books in Spanish available at the state convention to be held in April this year!

"All Great Chefs of District II" are being called to dig out their favorite recipe to bring to the "MEN WHO COOK" April 15, 1989 buffet style meal. This fund raiser will let the light shine on our male doctors or male spouses of physicians. So men, here is your chance to cook and bring your favorite prepared food to a fun event! If you need more details or further information on this buffet meal, please feel free to call B. J. Czewski, events chairman, at 236-1370.

Hope you have seen FWOMC's comprehensive advertising campaign which kicked off in January. The objective of the campaign is educational and to make the community aware of osteopathic medicine and osteopathic physicians. It focuses on the similarities with allopathic medicine and the fact that osteopathic physicians have the same background as allopathic physicians plus have additional training. Also, through this campaign, FWOMC's own physician referral service, CareLink, is promoted. Three spokespeople present these messages and have appeared in both television and print ads. One is Dr. Robert McFall, a D.O. surgeon, who discusses the difficulty and rewards of being a physician. Congratulations to Dr. McFall and to the two other spokespeople who have done such a superb job and have come across in such a professional and positive manner.

Another item of interest is the national advertising campaign initiated by AAOA which presents important

information about osteopathic physicians to millions of Americans. Since fall, a beautiful two-page color ad appeared in *The Saturday Evening Post* and a black and white ad appeared in the United Airlines inflight magazine. Sue Urban, our state president of ATOMA, was the guest speaker at our auxiliary meeting on January 15. We especially enjoyed her visit with us, and she updated us on the campaign. Plus, she noted to us that in the December 1988 issue of the AOA's magazine, *The DO*, the state auxiliary's coloring book project was highlighted. A picture of the cover of the coloring book appeared with the acknowledgement of the efforts of the auxiliary to distribute it and also to do story hour readings. The coloring book project prominently figured in the article update of activities and projects that occurred during NOM week throughout the nation. We were honored to have such a fine article printed.

Our sincerest condolences are sent to Drs. William, Brian D., Robert G. and John B. Ranelle and their families in the loss of their loved one, Dr. Hugo J. Ranelle. Dr. Ranelle helped establish the Fort Worth Osteopathic Hospital in 1946 and was a giant force in the profession. His obituary is listed in this issue of the *Texas DO*. Our deepest sympathy is extended for he will be deeply missed by the entire osteopathic community which he served so well.

Call Valorie Lowry (Courtesy Chairman) at 763-0766 in regards to birthdays, marriages, bereavements, etc.

See you next month as we review the highlights of our Wintercrest Charity Ball.

By Chuckie Hospers
ATOMA President-Elect

What An Opportunity We Have!

We often forget what a wonderful opportunity we have to make our auxiliary an effective and viable organization. The many occasions we have to reach out to our community in promoting osteopathy are never ending. We all know in our daily lives we come in contact with those who want to know about osteopathy, its philosophy and how it is different. I challenge you to accept that opportunity to make a difference! What better way can we accept that challenge than by becoming an active member in ATOMA.

For the most part, our dwindling numbers suggest we are sitting back and letting those wonderful opportunities slide on by. We can always come up with so many excuses and certainly valid ones. So where does that leave us? How can we be effective when only a few are willing to be involved? What a shame for the osteopathic profession when we have so much to offer and not willing to give!

We are desperately needing members who are willing to take that extra step and do their part for a profession that has benefitted all of us. We need members who are willing to serve on our district and state boards, and are willing to accept the challenge of moving up to an elected office so that our organization can benefit from our talents and experience. What an opportune time to become familiar with parliamentary procedure! What a wonderful way to become familiar with the other members in the auxiliary! What better way is there to broaden our insights as to why an organization is effective? What an excellent opportunity we have as a member to be able to grow individually and gain the experience that can make us a better person, thus making us more effective in our community.

I ask you to personally become involved and no longer find excuses. Let's stop denying ourselves the wonderful opportunities we have to grow as individuals. Let's stop the rationalizing and excuse finding syndrome we often find ourselves caught up in. Become an active member and reap the many benefits that are waiting for you!

I challenge you to become involved. Let me know if you are interested in becoming involved at the district or state level. Our auxiliary needs you, your talents, your input and your skills to make it a successful organization. What a wonderful opportunity we all have. Let's make the most of it and become active members of ATOMA!

By Mary Eileen Del Principe
President, District XV

First, a special thanks to everyone for coming to our February meeting. I hope everyone had a good time. Thanks again to Sue Urban, State ATOMA President, for speaking. We appreciated her coming. Congratulations to those who won door prizes. I hope they are enjoying their scarves and the various ways to use them.

The officers met earlier this month at the home of Karen Whiting. We decided our district should plan a luncheon at one of the local restaurants. We have such a good time meeting, we wanted everyone to come. We'll try and pick a date and everyone is invited.

The members of ATOMA District XV are looking forward to the state convention in our district this year. We would like to welcome the ATOMA members from

around the state. We would like to encourage everyone to support the many activities, especially the installation luncheon for Chuckie Hospers, our new State President.

If anyone is interested in being a delegate, please let me know. I do have some volunteers, but I would hate to miss anyone who really wants to be one.

Also, if you did not receive an invitation at your home for our last meeting, let one of the officers know. This is the most current list we have. If you have moved or are planning to, keep the district updated.

Texas Vital Statistics For 1987

There were 301,827 babies born to Texas mothers in 1987, a decrease of 5,176 or 1.7 percent less than 1986. With an estimated population of 16,937,000 as of July 1, 1987, the birth rate of 17.8 per 1,000 population dropped 3.3 percent from the 1986 rate of 18.4 and is the lowest rate seen since 1977.

There were 119,734 deaths of Texans in 1987, and the death rate was 7.1 per 1,000 population, the same as it was in 1986. The increase in total deaths from 1986 was 1,097 or less than 1 percent.

The infant mortality rate dropped to another all time low of 9.1 per 1,000 live births, more than 4 percent under the previous low of 9.5 in 1986. There were 2,744 infant deaths, down almost 6 percent from the 1986 total of 2,916.

Claiming 40,037 lives, heart disease continued to be the leading cause of death, followed by cancer with 25,327 deaths. Cerebrovascular disease was third with 8,181 deaths, and accidents, accounting for 6,402 deaths, was fourth. These four leading causes of death were responsible for 67 percent of the total deaths in 1987.

Completing the ten leading causes of death were:

| | |
|--|-------|
| Chronic Bronchitis, Emphysema, Asthma and Allied Conditions | 3,874 |
| Pneumonia and Influenza | 3,484 |
| Suicide | 2,180 |
| Diabetes Mellitus | 2,127 |
| Homicide | 1,948 |
| Nephritis, Nephrotic Syndrome, and Nephrosis | 1,435 |

Together, the ten leading causes of death accounted for slightly less than 80 percent of all deaths of Texans.

AOA Updates

HHS Rules On Illegal Financial Arrangements

A proposed rule to strengthen the anti-kickback and bribery provisions of Medicare and Medicaid law was published January 23 by the Department of Health and Human Services (HHS). The intent of the regulation is to specify various financial arrangements which, although potentially capable of inducing referrals of business under Medicare, would not be considered kickbacks for purposes of criminal prosecution or civil remedies.

The proposed regulations define a number of exemptions, or "safe harbors," to clarify which arrangements would not be considered kickbacks. One such exemption would involve investments in large public corporations which meet certain standards for minimum numbers of shareholders and company assets.

An item of intense controversy, even within HHS, is investment in limited partnerships. No referrals would be

permitted to limited partnerships in which a physician is an investor. HHS notes it wants public comment on exempting some limited partnerships, such as those which meet the following conditions: 1) a bona fide opportunity to invest is made on an equal basis to people in a position to make referrals as well as others, where no referrals are required, where disclosure is made to the referred patient, and where payments are not related to referrals; and 2) managing partnership interests where disclosure is made to the patient, and where payments are not related to referrals.

Other safe harbors would be created for investments involving space and equipment rentals, sale of practice, personal services/management contracts, referral services, warranties, and waivers of deductibles for inpatient hospital care.

HCFA To Implement New Identification System

The Health Care Financing Administration (HCFA) has begun implementing a new system to uniquely identify every physician who treats Medicare patients. Under the system, each doctor will be assigned a Unique Physician Identification Number (UPIN), which will remain with the physician throughout his or her career.

In order to uniquely identify all providers, HCFA is establishing a Registry to assign the numbers. The Registry Carrier will maintain physician data as well.

HCFA has contracted with the American Medical Association to provide an extract of data from the Physician Masterfile for comparison to data supplied by each

Medicare carrier. HCFA has agreed to enter a similar arrangement with AOA for data on DOs.

By comparing carrier data with AMA and AOA data, the Registry will be able to issue a UPIN for most physicians. When there is a discrepancy in the data, the Registry will first try to resolve it with the professional society data file. When this effort does not resolve the discrepancy, the carrier will contact the individual physician.

HCFA hopes to have the program in operation by April, 1989. Eventually, it is hoped that the UPIN will replace the existing system of provider numbers.

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FORT WORTH — New clinic seeking energetic general practitioner to work 8:00 - 5:00, Mon. - Fri. until August 1. Salary open. Contact Bill Puryear, D.O. or Jim Czewski, D.O. at 817/232-9767. (10)

WEST TEXAS — General internist needed at County Hospital. Town of 12,000 and county of 16,000. Close to Lubbock and Midland/Odessa. New Mexico skiing close. New ICU-CCU wing under construction. Guaranteed incentive program. Excellent Ancillary departments. Contact Patrick J. Hanford, D.O. at 806/872-2113. (54)

INTERNIST — Arlington Medical Center, excellently located in fast growing Southeast Arlington, needs a general internist to assist the patients of five GP/FP, OB/GYN, Surgeon and Orthopedic Surgeon. Space sharing in fully equipped office available. Contact: Dean Peyton, D.O., 1114 E. Pioneer Parkway, Arlington, 76010; 817/277-6444. (56)

FULL AND PART-TIME PHYSICIANS WANTED — for several primary care/minor emergency clinics in the D/FW area. Flexible schedule, excellent potential for growth and financial success. Please send resume or contact: Steve Anders, D.O., Medical Director, Ready-Care Medical Clinic, 4101 Airport Freeway, Suite 101, Bedford, 76021; 817/540-4333. (40)

CENTRAL TEXAS (Austin and San Antonio areas) — physician interested in ambulatory care and emergency medicine for several low to medium volume facilities. Emergency medicine experience; compensation commensurate with volume. Contact: Donovan Butter, D.O. at 512/935-4329. (36)

WELL ESTABLISHED GENERAL PRACTICE — 275K without night/ER Call/OB. Texas coast great for hunting and salt/fresh water fishing. Large modern clinic with lab, x-ray, minor room EKG, quarters, 5 exam rooms. D.O.-friendly area with abundant OB/surgery ad lib. Can double income if you want to work that hard. Present physician will retire as soon as new doctor is acclimated, preferably 6-12 months. Multiple purchase/lease/salary options available without front money. Available spring, 1989. Write to: TOMA, Box 21, 226 Bailey Avenue, Fort Worth, 76107. (21)

FULL-TIME TEACHING POSITIONS — at Texas College of Osteopathic Medicine, Department of General and Family Practice. Required characteristics: academic contact, osteopathic orientation, community involvement and balanced practice. Recommended characteristics: certification, scholarly activity interest and residency training. Contact: Richard Baldwin, D.O., Acting Chairman, TCOM, Dept. of General and Family Practice, 3500 Camp Bowie Blvd., Fort Worth, 76107-2690; 817/735-2433. TCOM is an Equal Opportunity Employer. (30)

FULL/PART-TIME PHYSICIANS — earn \$200 to \$500 per day — no weekends — no nights. Physical examinations with osteopathic orientation. Establish physical therapy protocols. Several locations available. Send resume to P.O. Box 64758, Dallas, 75206. (27)

ASSOCIATE NEEDED — for expanding general practice in East Texas. Guaranteed income with a future. Contact: Steve Rowley, D.O., 214/849-6047 or Mr. Olie Clem, 214/561-3771. (08)

PARTNERSHIP — offered in thriving general practice on the Gulf Coast. Coverage available, Intern/Extern approved hospital with TCOM affiliation. Contact Sam Ganz, D.O., 3933 Upriver Road, Corpus Christi, 78408. (51)

NEEDED — general practitioner or internist and one surgeon for panhandle town of 25,000. 125-bed-hospital and clinic. Financial assistance available. Cross coverage available. Contact: Jim Baker 806/669-1035; 669-1242; 665-7214. (35)

WANTED — Family practitioner to locate in underserved area. For further information, please call 817/735-4466. (35)

OFFICE SPACE FOR LEASE — approximately 1200 sq. ft. suitable for general practitioner or specialist. Area of Dallas Memorial Hospital near downtown Dallas. Contact Billie Biggers, 214/827-1520. (01)

TEXAS COLLEGE OF OSTEOPATHIC MEDICINE — is seeking an outstanding physician to chair the Department of General and Family Practice. This is a key position because TCOM is strongly committed to the education of primary care physicians which includes extensive clinical education in an ambulatory care setting. An individual with demonstrated leadership skills and commitment to osteopathic medical education is desired. The candidate must have a Doctor of Osteopathy (D.O.) degree and be certified by the American Osteopathic Board of General Practice. Experience with primary care residency training is also desirable. Interested persons should send a curriculum vitae and the names of three references to: Russell Gamber, D.O., Center for Osteopathic Research and Education, TCOM, 3500 Camp Bowie Boulevard, Fort Worth, 76107-2690. Applications should be received by May 1, 1989, to ensure full consideration. TCOM is an equal opportunity/affirmative action employer. (09-11)

SUCCESSFUL RURAL CLINIC — needs associate physician full time. No hospital; no ER; no nursing home; regular hours. Sixty (60) miles S.E. of Dallas. Call Cedar Creek Medical Associates at 214/432-2707. (13)

OFFICE SPACE AVAILABLE

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

PRACTICE AVAILABLE IN CORPUS CHRISTI — office fully equipped and was previously an active general practice. Contact, TOMA, Box 2, 226 Bailey Avenue, Fort Worth, 76107. (42)

CLINIC FOR SALE — Doctor retiring; clinic and all equipment for sale; small town living with big city conveniences with Dallas/Fort Worth metroplex only one hour away; two nursing homes in town. Call 817/686-2254 (day) or 817/686-5463 (evenings). (19)

MESQUITE, POPULATION 100,000 — The office is fully equipped, has a 33 year practice with cranial treatments to patients. Office space 1800 square feet; family practice — no OB any more. Ideal for beginning physician. Office space for lease. Contact: Mrs. Brunhilde Nystrom, 14/285-5580 (evenings), P.O. Box 341, Mesquite, 75149. (39)

CLINIC FOR SALE — growing minor emergency/family practice clinic. San Antonio; grossing over \$250,000. Many established workers compensation and insurance physical accounts. Modern free-standing building for rent or sale; fully equipped; available May 1. For more information write to: TOMA, Box 33, 226 Bailey Avenue, Fort Worth, 76107. (33)

EXCELLENT LOCATION AND FACILITY — for one or more doctors. Free standing building, west Fort Worth. Corner lot, plenty of parking. Purchase or lease. Some equipment. 817/294-1900 or 817/295-1751. (48)

MEDICAL CLINIC BUILDING — for sale or lease. Complete with necessary equipment. Good opportunity for MD, DO, or Dentist. One mile north of downtown Fort Worth courthouse. Immediate possession. Call 817/626-0511. (18)

MISCELLANEOUS

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)

ATTORNEY — representing the D.O. in professional matters, including: TSBME formal and informal hearings; medical staff privileges; contracts; Professional Associations; partnerships; and leases. Robert J. Ratcliffe, 1104 Nueces, Suite 4, Austin, 78701; 512/477-2335. (Fully licensed attorney in Texas and Tennessee; not certified as to specialty; 1979 graduate Vanderbilt University Law School). (50)

FOR SALE — 1) Fetal Doppler D520 with auto-power shut off. 2) Meda Sonics Ultrasound Fetal doppler with speaker; \$300 each. Call 817/338-0555. (07).



A SPRING UPDATE FOR THE FAMILY PRACTITIONER III

DATE

Saturday, April 1, 1989

PRESENTED BY

Dallas Family Hospital
and

Texas College of Osteopathic Medicine's
Office of Continuing Medical Education
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LOCATION

Dallas Family Hospital
2929 S. Hampton Road
Dallas, Texas 75224

TOPICS

*The Kidney and Congestive
Heart Failure*
Jeffrey Bleicher, D.O.

*Diagnosis and Treatment of
Acute Myocardial Infarction*
James Reznick, D.O.

*Treatment of Nosocomial Pneumonia
in the ICU*
James Hugin, D.O.

Breast Cancer Update 1989
A.G. Bascone, D.O.

Management of Low Back Pain
Kenneth Bayles, D.O.

Aspirin Therapy and other NSAIDs
Raymond Pertusi, D.O.

*Current Options of Hormonal
Replacement*
Robert Adams, D.O.

*Current Concepts in Evaluation and
Treatment of Pulmonary Edema*
Robert Garmon, D.O.

*Anemia: A New Look at an
Old Problem*
Gregory Friess, D.O.

Office Dermatologic Procedures
Bill Way, D.O.

ACCREDITATION

7 Hours of CME Category 1-A
from AOA

CONTACT

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

FEES

| | |
|---|-----------|
| Physician | \$130 |
| Physician — TCOM Alumni Association Member & Military | \$117 |
| Physician — TCOM Affiliated and All Retired Physicians | \$ 65 |
| Externs/Interns/Residents | No Charge |

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226 Bailey Avenue
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