Texas Osteopathic Medical Association March, 1991

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arch 1991

Texas Osteopathic **Medical Association** March, 1991

Calendar of Events



Texas DO is the official publication of the Texas Osteopathic Medical Association.

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Tom Hanstrom, Editor Diana Finley, Associate Editor Lydia A. Kinney, Staff Writer

San Antonio, Texas Site for **92nd Annual Convention** May 2-5, 1991

APRIL 12-13

"Spring Update for the Family Practitioner" Sponsored by: TCOM Dallas Family Hospital 2929 South Hampton, Dallas 8 CME Hours Category 1-A, AOA Contact: Karen Trimble

> TCOM, Dept. of CME 817/735-2581

13-16

"1991 Sports Medicine Clinical Conference'

Sponsored by: The American Osteopathic Academy of Sports Medicine Boston Park Plaza

Boston, MA Contact: Jerry Collins, AOASM 7611 Elmwood Ave. Suite 202 Middleton, WI 53562 608/831-4400

30

Trustees' Meeting" St. Anthony Hotel San Antonio Contact: TOMA Headquarters 800/444-8662

"TOMA Pre-Convention Board of

MAY

"TOMA House of Delegates Meeting" St. Anthony Hotel San Antonio Contact: TOMA Headquarters

800/444-8662

2-5

'TOMA 92nd Annual Convention & Scientific Seminar' St. Anthony Hotel/Municipal Auditorium San Antonio

A possible 30 Hours, Category 1-A, AOA (Registration information can be found inside this issue)

Contact: TOMA Headquarters 1/800/444-8662

"Quality Assurance Seminar" Sponsored by: Texas Medical Foundation Municipal Auditorium San Antonio Contact: TOMA Headquarters

800/444-8662

"TOMA Post-Convention Board of Trustees' Meeting" St. Anthony Hotel San Antonio Contact: TOMA Headquarters 800/444-8662

"TOMA Risk Management Seminar" St. Anthony Hotel San Antonio 8:00 a.m. - 1:30 p.m.

Contact: TOMA Headquarters 800/444-8662

"TOMA Osteopathic Manipulative Treatment Workshop' Sponsored by: TCOM, Dept. of Manipulative Medicine St. Anthony Hotel

San Antonio 8:00 a.m. - 12:00 noon Contact: TOMA Headquarters 800/444-8662

JUNE 7-9

"Eleventh Annual General Practice Update Sponsored by TCOM Sheraton South Padre Island Beach Rese South Padre Island 11 CME Hours Category 1-A, AOA Contact: Karen Trimble

TCOM, Dept. of CME 817/735-2581

On The Cover

Pictures Courtesy of San Antonio Convention and Visitors Bureau

Top: The Alamo — Shrine of Texas Liberty. The present building is the old chapel of Mission San Antonio de Valero founded in 1718 by the Franciscan padres. In 1836, during the war for Texas independence, the Alamo was the scene of one of the most heroic events in the history of our nation. All of the 189 defending Texas soldiers were killed here while being beseiged by Mexican troops under the Mexican General Santa Anna. The now renowned battle cry, "Remember the Alamo," later carried the Texans to victory.

Lower left: Carriage in King William Historic District. Horse drawn carriages provide tours of certain parts of downtown San Antonio, including the King William Historic District. Wealthy German merchants and craftsmen settled in this area in the mid to late 1800's. Two homes, the Steves Homestead and the Guenther House, are open to the public on a regular basis.

Lower right: San Fernando Cathedral. The church of the Canary Island colonists who came to San Antonio in 1731, San Fernando Cathedral is the oldest parish church in Texas and the oldest cathedral sanctuary in the United States. Located in the heart of San Antonio, it is the mother church of the Archdiocese of San Antonio. The old church reflects a blend of 18th and 19th century architectural styles. It was from the bell tower of San Fernando that the first alarm was sounded to the defenders of the Alamo that the Mexican Army was advancing toward the city.



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DAVID OSTRANSKY, D.O. PULMONOLOGY



Dr. Ostransky is a pulmonologist in private practice, formerly a faculty member at Texas College of Osteopathic Medicine. He is a graduate of Kirksville College of Osteopathic Medicine. He completed his internship, residency and fellowship at Grandview Hospital/Ohio University College of Osteopathic Medicine.

Dr. Ostransky received additional training in pulmonology at the University of Cincinna UTHSC in San Antonio, and Washington University in St. Louis, Missouri. He is a diplomate of The American College of Osteopathic Internists, with certification in internal medicine and pulmonology.



1236 Southridge Court, Suite 200 Hurst, Texas 76053 (817)268-5864 (METRO)

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March 1991 Texas DO/5

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

DRAWING WILL BE HELD DURING THE SATURDAY MORNING
REFRESHMENT BREAK WITH THE EXHIBITORS
AT THE MUNICIPAL AUDITORIUM — 10:00 a.m.

Texas Osteopathic Medical Association

92nd Annual Convention

Doctors pre-registration — \$300; Doctors at-the-door — \$350; 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.

Mail To: TOMA, 226 Bailey Avenue, Fort Worth, Texas 76107

PRE-REGISTRATION DEADLINE - APRIL 15

Name	(please print)	First N	ame for Badge	
City	State_	AO	A Membership No	
D.O. College			Year Graduate	d
My Spouse	(first name for badge)	will	will not	accompany me.
My Guest	(first AND last name for badge)	will	will not	accompany me.

TOMA Annual Golf Tournament Registration

> \$45 per person includes ½ cart, green fees, transportation (Cash Bar) Gateway Hills Championship Course Lackland AFB Friday, May 3, 1991

CHECK ENCLOSED (please make payable to TOMA)

Refund Policy

The REFUND POLICY for the 92nd 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.

TOMA HAS DISCOVERED AN IMMUNIZATION FOR THE HEALTH INSURANCE "EPIDEMIC"

The high cost, no guarantee system of health insurance coverage is a "disease" that is affecting ALL small employers. Instead of providing long-term, affordable protection from financial losses due to accidents and illness, today's health insurance industry has created tremendous short-term burdens with no certainties of continued coverage in an environment that is as volatile as ever.

A recent item from Medical Economics magazine (March 5, 1990) indicates further the troubles that surround small employers, and even more specifically physicians. It reads:

"While state and federal legislators debate the merits of requiring employers to provide health-care coverage for their workers, health insurers are refusing to issue policies to more and more small businesses and professions. Some carriers are even blacklisting physicians and nurses, chiropractors, dentists, and others in the health-care field. One reason that medical workers may be excluded, carriers say, is they tend to have a high rate of utilization."

Although a total cure for these problems may still be far away, TOMA has discovered an "immunization" for its members that can help shield the frustrations that managing health insurance (or the lack of) can cause

TOMA has appointed DEAN, JACOBSON Financial Services to handle the complexities of health insurance environment for you. They have just negotiated with CNA Insurance Company (an A+, Excellent rated company with a long, successful record in the accident and health business) to offer Major Medical coverage to TOMA members at very competitive rates. Best of all, with CNA's strength in the health insurance market and DEAN, JACOBSON's management of insurance services. TOMA will have a superior Health Insurance Program that has long been needed.

DEAN, JACOBSON Financial Services is recognized statewide for their expertise in insurance and related areas. So regardless of your current situation with health coverage, call DEAN, JACOBSON Financial Services to help you immunize against the health insurance "epidemic."

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

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(817) 335-3214 P.O. Box 470185 Fort Worth, TX 76147 (800) 321-0246 (817) 429-0460 Dallas/Fort Worth Metro

Western Theme for Sustainers Party

Bales of hay, western decorations and a country western band sets the ambiance of the Sustainer's Party during the TOMA's 92nd Annual Convention and Scientific Seminar, May 2-5, 1991, in San Antonio.

ATTENTION SUSTAINERS: This year you will be given a special ticket to attend the Sustaining Membership Party. On the reverse side of the ticket, you will be asked to sign your name and the name of your guest. ONLY the name of the sustainer and his/her GUEST will be able to attend this event. Tickets CANNOT be bought for family members or friends.

The good ol' country band is called E.Z. Pickens. They emphasize music from the "Top Forty" as well as the standards of yesterday and rock and roll favorites. The musicians represents 72 years of professional experience. David Kemp plays guitar, harmonica, fiddle and sings; Tony Norton plays lead guitar and banjo; Bob Moore plays bass guitar and sings; and Bill Brooks is the manager and drummer for the group.

In addition to the country western jamboree, there will be a baseball cap with the Alamo engraved on the front especially created for the "Good Guys" to be given to all sustaining members of TOMA. When delegates to the House register Wednesday, May 1, a member of the Gam will be on hand to pass the hats to the "Good Guys"

If you haven't already paid this year's dues, including the extra \$100 (sustaining); \$150 (sustaining plus); or \$25 (sustaining patron), there is still time to sign up. Just sen your check for \$100, \$150 or \$250 to the TOMA Head quarters prior to the convention and your name will a into the drawing for a Black Angus steer donated b Robert Finch, D.O., owner of the Black Champ farm in memory of his partner and friend, the late Robert O Haman, D.O.

Dr. Haman is the man who actually began an ramroded the Sustaining Membership Program in th early 1970s. His idea was to create a special classifica tion of membership whereby members of TOMA would donate to the association's general fund extra monies s that TOMA could use it where it was most needed.

The association needs your support as a sustaining member, so fill out the application below and becom a "Sustainer" and join the fun at the St. Anthony Hotel Thursday evening, May 2.

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	d authorize you to increase my dues billing \$100 ar
		authorize you to increase my dues billing \$150 ar
I hereby elect to become a	Sustaining Patron Member and	authorize you to increase my dues billing \$250 ani

TOMA Convention Will Feature Risk Management Seminar

TOMA will be offering a Risk Management Seminar during this year's annual convention, on Sunday, May 5, in order to satisfy several states' relicensure requirements. Physicians are also reminded that Texas law requires 15 hours of risk management annually in order to be eligible for malpractice premium reductions and the state liability indemnification program as passed by the 71st Texas Legislature. Those attending this seminar will earn five hours of Category 1-A CME and will receive a certificate of attendance.



Presenting the topic "How to Protect Yourself Against Professional Liability Suits" will be Michael G. Victor, D.O., J.D., F.C.L.M., who is being sponsored by ProMed/PMICRRG.

Dr. Victor earned his D.O. degree at Des Moines College of Osteopathic Medicine and Surgery and interned at Good Samaritan

Hospital, Dayton, Ohio, where he also completed a cardiovascular surgery fellowship.

He attended Lewis University College of Law from 1975-79, and from 1979-80, attended Northern Illinois University, College of Law, earning his J.D. degree in 1980.

Dr. Victor resides in Barrington, Illinois, and practices emergency medicine and medico-legal consultation. He is licensed to practice medicine in Illinois, Indiana, lowa and Ohio; and legal licensure encompasses the Illinois Supreme Court; Federal District Court, Northern District of Illinois; and the U.S. Appellate Court 3rd District.

He is board eligible in emergency medicine and is a Diplomat of the American Board of Law in Medicino Organization memberships include the American College of Emergency Physicians; American College of Legal Medicine — Fellow; Illinois State Medical Society; Illinois Chapter, American College of Emergency Physicians; Illinois State Bar Association; American Bar Association; Chicago Bar Association; American Trial Lawyers Association; and American Society of Law and Medicine

Dr. Victor has given multiple presentations in the field of emergency medicine since 1973, and multiple presentations on legal issues in medical practice since 1977.

Michael Young, J.D., of the Texas State Board of Medical Examiners, will present "Update of the Medical Practice Act and Rules of the Texas State Board of Medical Examiners"



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

of Medical Services, director of the Office of Medical Ethics and as a TMA attorney.

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



"Update on Proposed Legislation Pertaining to Controlled Substances and Dangerous Drug Laws and Rules of the Texas Department of Public Safety" will be presented by Captain Adolph Thomas of the Narcotics Service of the Texas Department of Public Safety.

Captain Thomas graduated from Edgewood High School in San Antonio; attended San Antonio College, where he received an Associate in Law Enforcement; and studied criminal justice at Southwest Texas State University, San Marcos.

From 1968 to 1972, he served as a highway patrolman with the Traffic Division of the Texas Department of Public Safety (DPS); from 1972-74, as an agent investigator, narcotics, with the DPS; and from 1974-88, as midsupervisor in the Narcotics Service of the DPS in San Antonio, and as an instructor at San Antonio College in the Law Enforcement Division. In 1988, Captain Thomas began his current position with the DPS Narcotics Service.

Memberships include the Texas Narcotic Officers Association; Texas Peace Officers Association; FBI National Academy Associates of Texas; and the National Rifleman's Association.

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1991 TOMA Convention Speakers Continued



Presenting the "Unique Osteopathic Philosophy of Practice" during TOMA's annual convention, May 2-5, in San Antonio, will be Gregory A. Dott, D.O., of Fort Worth.

A graduate of Texas College of Osteopathic Medicine, Dr. Dott interned at Osteopathic Hospital of Maine, Inc.,

and took a family practice residency at Dallas Memorial Hospital.

He is certified in general practice by the American Osteopathic Board of General Practice. Dr. Dott is currently an instructor in the Department of Manipulative Medicine at Texas College of Osteopathic Medicine.

Memberships include the AOA; TOMA; TOMA District V; TCOM Alumni Association; American College of General Practitioners in Osteopathic Medicine and Surgery (ACGP); Texas State Society of the ACGP; American Academy of Osteopathy; and the Cranial Academy.

Dr. Dott is also a sponsor for the TCOM Chapter of the Undergraduate American Academy of Osteopathy, and an interviewer for the TCOM Admissions Committee regarding potential students. He is currently involved in research regarding the reliability of iliac crest heights or femoral trochanteric heights as an accurate indicator of sacral base declination.



"Sneeze Busters!... or What is New in the Treatment of Allergic Diseases" will be presented by Bruce G. Martin, D.O., of San Antonio. He will review the current evaluation and treatment approach of allergic rhinitis and other allergic conditions from an allergist's perspective. The treatment of these conditions will be

emphasized, and new medications and medications under development will be reviewed.

Dr. Martin is in private practice in San Antonio, specializing in allergy and immunology. He received his D.O. degree from the College of Osteopathic Medicine and Surgery, Des Moines, Iowa. He took a rotating internship at USAF Medical Center Scott, Scott Air Force Base, Illinois; a pediatrics residency at Brooke Army Medical Center in San Antonio; and an allergy/immunology fellowship at Fitzsimons Army Medical Center in Denver, Colorado.

Dr. Martin is a diplomate of the American Board of Pediatrics and the American Board of Allergy/Immunology. Memberships include the American College of Allergists (Fellow); American Academy of Pediatrics (Fellow); American Academy of Allergy and Immunology (Fellow); Association of Military Allergists;

Texas Allergy Society; and the San Antonio Allergy Society.



Randall White, M.D., of San Antonio, will present "Modern Therapy of Coronary Heart Disease" during the TOMA convention. According to Dr. White, arteriosclerotic cardiovascular disease continues to be the number one cause of death in the United States. Diagnostic and therapeutic modalities

have advanced our understanding and care in these patients. New diagnostic strategies include PET imaging (Positron Emission Tomography) as well as SPECT (single photon emission tomography) imaging. Advances in therapeutic modalities include early and aggressive institution of lytic therapy in those individuals presenting with acute myocardial infarction and appropriate predischarge risk stratification. These issues will be discussed and questions entertained as time allows.

Dr. White is a clinical instructor in the Department of Medicine at the University of Texas Health Science Center in San Antonio.

He received his M.D. degree from the University of Texas Southwestern Medical School at Dallas, and took an internship and internal medicine residency at the University of Texas Health Science Center, Medical Center Hospital, San Antonio. Dr. White also completed a cardiology fellowship at the same hospital.

He is a diplomate of the American Board of Internal Medicine and of the American Board of Internal Medicine, Cardiovascular Disease.



"Early Office Recognition and Intervention of Drug and Alcohol Dependence" will be presented by Jan S. Swanson, D.O., of Fort Worth. Dr. Swanson will begin with a brief introduction and move on to screening, assessment and diagnosis; problems in diagnosis; making the diagnosis; levels of

intervention; and a summary.

Dr. Swanson is medical director of Schick Shadel Hospital in Fort Worth, an inpatient hospital facility for patients with drug and alcohol dependencies, where she supervises the medical staff and helps implement policies. Patients receive medically supervised detoxification and medical treatment for alcohol and drug dependencies as well as general medical problems. She is board certified in internal medicine with a sub-specialty in addiction medicine.

A graduate of Michigan State University College of Osteopathic Medicine, Dr. Swanson interned at Westview

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Osteopathic Hospital in Indianapolis, Indiana, and completed a medicine residency at St. Vencent Hospital and Health Care Center, also in Indianapolis.

Memberships include TOMA: TOMA District II; American College of Physicians; and the American Medical Society on Alcoholism and Drug Dependencies.



"Treating Chronic Pain with Electrotherapy and Thermography as a Diagnostic Tool" will be presented by James W. Finney, Ph.D. Dr. Finney is on the staff of the Pain Treatment Center in Fort Worth, a multiple-disciplinary referral resource dedicated to the control and/or definitive treatment of chronic

intractable and acute pain.

Dr. Finney earned his B.A. from The University of Texas at Austin; his M.S. from The University of Texas and USAF School of Aerospace Medicine; and his Ph.D. degree from Baylor University, Graduate Division, Dallas. He is board certified by the American Academy of Neuromuscular Thermography.

Professional appointments and offices include associate member of the staff of the Radiation Center, Fort Worth; consultant to Medical Designs, Inc.; and clinical director of Metroplex Dolorology Center.

Dr. Finney is a member of the American Association for Cancer Research, Southwest Section; the New York Academy of Sciences; American Association for Cancer Research; Association for Advancement of Medical Instrumentation; American Academy of Thermology, associate in Related Health Sciences; Academy of Neuro-Muscular Thermography; The Society of Sigma Xi; and a fellow of the American Academy of Neurological Orthopaedic Surgeons.



Harvey M. Richey, III, D.O., of San Antonio, will present "COPD and Family Practice," which will consist of a review of the treatment of obstructive lung diseases for the family practitioner with emphasis on office treatment of these diseases.

A graduate of Texas College of Osteopathic Medicine, Dr. Richey interned at William Beaumont Army Medical Center, El Paso, where he also completed an internal medicine residency. He then completed a pulmonary disease fellowship at Brooke Army Medical Center in San Antonio.

Dr. Richey is in the private practice of pulmonary medicine in San Antonio. He is a diplomate of the National Board of Examiners for Osteopathic Physicians and Surgeons, and is board certified in both pulmonary disease and internal medicine by the American Board of Internal Medicine. Additionally, he serves as director of the Medical Intensive Care Unit at Brooke Army Medical Center.

He is a fellow of the American College of Chest Physicians and on the Program Committee of the Alamo Area American Lung Association.



"Acute Epiglottis: Recognition and Management" is the topic to be presented by Cecil W. Fincher, D.O.

According to Dr. Fincher, acute epiglottis, as with any upper airway obstructive process, represents one of true emergencies facing physician responsible for the care of pediatric

patients. These patients seldom present with related preexisting disease. Although almost all of these patiens will recover with proper therapy, failure to respect and respond to this disease process may result in irreversibhypoxic injury, permanent complications of an artificial airway or preventable death.

In addition to an understanding of the presentation of acute airway obstruction, the physician is bette equipped to manage a patient if one appreciates the anatomic and functional vulnerability of the pediatriairway. The impact of oxygen consumption and the concept of dynamic airway collapse should be considered.

Because the diagnosis of acute epiglottis (or any aiway obstruction) is often not easily separated from emergent therapy, there must be a systematic approact to this problem. The spectrum of airway management may vary from the child with early minimal symptom in mild distress to the child who has already suffered cardiopulmonary arrest. Considerations include but an not limited to: preparation for a respiratory arrest, proper positioning, use of diagnostic x-ray procedures, induction and intubation techniques, diagnosis of post obstructive pulmonary edema, indication for tracheostomy, current antibiotic therapy, use of seafon prevention of inadvertent extubation, criteria for extubation, and increasing awareness as a problem also facing the adult population.

An appreciation of similar disease processes (i.e. laryngotracheo-bronchitis, foreign body aspiration, o bacterial tracheitis) is mandatory to properly manage these patients. However, because each of these syndrome present a certain degree of overlap, initial managemem may be accomplished by a utilization of basic airway management and sound clinical judgment. The specific approach to evaluate and control the airway depends not only on the patient and his problem but upon the clinician and his particular capabilities. A familiarity with the clinical appearance, pathophysiology and treatment of these conditions will prepare one to handle these sometimes difficult cases and their complications as the arise.

Dr. Fincher received his undergraduate training from Abilene Christian University and his D.O. degree from Texas College of Osteopathic Medicine. He interned

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Dallas/Fort Worth Medical Center, Grand Prairie, and took a residency in cardiothoracic anesthesia at Brooke Army Medical Center, with clinical training in pediatric anesthesia at Children's Hospital of Philadelphia.

Dr. Fincher is a Major in the Medical Corps, U.S. Army, and is on the anesthesia teaching staff at Brooke Army Medical Center in Fort Sam Houston, Texas.

He is previously stationed in Stuttgart, West Germany, where he was awarded an Army Commendation Medal as outstanding Aviation Medical Officer, U.S. Army VII Corps.



Robert J. Chilton, D.O., of San Antonio, will update physicians on "Indications for E.P. Testings (Electrophysiology) in a Control Environment."

A graduate of the University of Osteopathic Medicine and Surgery, Des Moines, Iowa, Dr. Chilton interned at Wright-Patterson Air Force Base in

Dayton, Ohio. He completed a residency at the University of Oklahoma Health Science Center in Oklahoma City, and a cardiology fellowship at Wilford Hall USAF Medical Center. San Antonio.

Dr. Chilton specializes in internal medicine, cardiology and electrophysiology and has a private practice in San Antonio. Additionally, he is Acting Director of Electrophysiology at the University of Texas Health Science Center, San Antonio, where he is also an associate professor of medicine; board member of the American Heart Association, San Antonio; and chief of medicine at Baptist Memorial Hospital, San Antonio.

Dr. Chilton is board certified in internal medicine and cardiovascular disease.

Memberships in professional organizations include TOMA; AOA; Fellow of the American College of Cardiology; Fellow of the American College of Physicians; Fellow of the American Heart Association; Texas Medical Foundation; Physicians Who Care; and North American Society of Pacing and Electrophysiology.

Frank J. Papa, D.O., FACEP, of Fort Worth, will present "Computer Based Diagnostic Tools" during the TOMA convention.

A graduate of Philadelphia College of Osteopathic Medicine, Dr. Papa completed a rotating internship at Doctors Hospital in Columbus, Ohio. He is a Fellow of the American College of Emergency Physicians, Diplomate of the American College of Emergency Physicians and Diplomate of the American College of Osteopathic Emergency Physicians.

Dr. Papa is associate professor, Division of Emergency Medicine, at Texas College of Osteopathic Medicine. He is due to receive his Ph.D. in Higher Education from the University of North Texas, Denton, this May.

He serves as a consultant to the National Board of Osteopathic Medical Examiners for both the Part III examination test construction committee and for the new "Special" examination for non-certified practitioners. Additionally, Dr. Papa is a member of the Emergency Medicine Educational Consulting Service of the Society for Academic Emergency Medicine; a reviewer of the "Journal of Emergency Medicine;" and a research coordinator for the Fort Worth Emergency Physicians Advisory Board.



"Pulmonary Manifestations of AIDS" will be presented by Greg T. Anders, D.O., of Fort Sam Houston, Texas.

According to Dr. Anders, the lung is a very common end-organ affected by HIV infection, with pulmonary involvement ranging from opportunistic infec-

tions to unusual malignancies to interstitial dysfunction. These problems may be commonly encountered by the primary care physician as either an end-stage feature of AIDS or as the sentinel indicator of HIV infection. In this lecture, the protean pulmonary aspects of HIV infection will be discussed, to include newer therapeutic considerations as well as prophylactic measures involving HIV-related lung disease.

Dr. Anders is a graduate of West Virginia School of Osteopathic Medicine. He interned at Brooke Army Medical Center, Fort Sam Houston, where he also completed an internal medicine residency and a pulmonary disease fellowship.

He practices in the Pulmonary Disease Service of the Department of Medicine, at Brooke Army Medical Center in Fort Sam Houston. Staff positions include Medical Director of Respiratory Therapy at Brooke Army Medical Center; Clinical Assistant Professor in Medicine at the University of Texas Health Science Center, San Antonio; consultant to the San Antonio State Chest Hospital; consultant (internal medicine) to the Texas Department of Health in Austin; and Research Director of the Pulmonary Disease/Critical Care Service at Brooke Army Medical Center, FSHIX.

Dr. Anders is board certified by the American Board of Internal Medicine (Internal Medicine) and the American Board of Internal Medicine (Pulmonary Diseases).

He is a member of the American College of Physicians; American Thoracic Society; Texas Thoracic Society; and a Fellow of the American College of Chest Physicians.

March 1991 Texas DO/13

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CME: Thursday: 71/2 Friday: 71/2 Saturday: 71/2 Visiting Exhibits (Optional) - 3 OMT (Optional) - 4 Risk Management (Optional) - 5 St. Anthony Hotel / Municipal Auditorium May 2-5, 1991

rogram

Tuesday, April 30

TOMA Board of Trustees' Luncheon 12:00 noon St. Anthony Hotel

TOMA Board of Trustees' Meeting 1:00 p.m. St. Anthony Hotel

6:30 p.m. Caucus of the Districts St. Anthony Hotel

Wednesday, May 1

TOMA House of Delegates' Registration 8:00 a.m. -12:00 noon St. Anthony Hotel 9:00 a.m. -TOMA House of Delegates' Meeting

5:00 p.m. St. Anthony Hotel

11:30 a.m. TOMA House of Delegates' Luncheon St. Anthony Hotel

ATOMA Board of Trustees' Meeting 1:00 p.m. St. Anthony Hotel

2:00 p.m. -Early Registration 4:00 p.m. St. Anthony Hotel

Thursday, May 2

7:00 a.m. General Convention Breakfast 'Update on TSBME Alfred R. Johnson, D.O. Municipal Auditorium

7:00 a.m. -"Osteopathic Manipulative Workshop" 8:30 a.m. Timothy H. Werner, D.O., Program Chairman Municipal Auditorium

7:30 a.m. -Registration and Visit with Exhibitors 4:00 p.m. Municipal Auditorium

> (All Thursday, Friday & Saturday lectures will be held at the Municipal Auditorium)

8:30 a.m. -"Modern Therapy of Coronary Heart Disease" 9:15 a.m. Randall White, M.D.

9:00 a.m. -ATOMA House of Delegates' Meeting 12:00 noon St. Anthony Hotel

9:15 a.m. -"Advances in Ophthalmology/Staying a Step 10:00 a.m. Ahead of Your Patients" Sebastian A. Mora, D.O.

10:00 a.m. -Refreshment Break with the Exhibitors Municipal Auditorium

11:00 a.m. -"Treating Chronic Pain with Electrotherapy and Thermography as a Diagnostic Tool James W. Finney, Ph.D.

11:45 a.m. -12:30 p.m.

"Anxiety Disorders: A New Approach to Diagnosis & Management David A. Baron, MSEd., D.O.

12:45 p.m. AOA Luncheon

"Update on Issues Concerning the American Osteopathic Association And It's State Societies" Gilbert Buchoz, D.O., President-Elect

2:00 p.m. -4:00 p.m.

Municipal Auditorium "Peer Review: Improving Quality of Medical Care Statewide; the Medicare Experience'

William Jones, D.O., Charles Cain, M.D. Daniel Schmidt, D.O., Donald M. Peterson, D.O.

Municipal Auditorium "COPD & Family Practice"

2:00 p.m. -2:45 p.m. Harvey Richey, D.O.

"Pulmonary Manifestations of AIDS" 2:45 p.m. -3:30 p.m. Greg Anders, D.O. 3:30 p.m. -"Sneeze Busters: Update on Allergy Medication"

4:15 p.m. Bruce Martin, D.O. 4:30 p.m. -Alumni Receptions

5:30 p.m. St. Anthony Hotel 5:00 p.m. -POPPs Party 6:30 p.m. St. Anthony Hotel

Sustainer's Party 7:00 p.m. -11:00 p.m. St. Anthony Hotel

Friday, May 3

7:00 a.m. -Texas ACGP Breakfast Municipal Auditorium 8:30 a.m.

7:30 a.m. -"Osteopathic Manipulative Workshop" 8:30 a.m. Timothy H. Werner, D.O., Program Chairman Municipal Auditorium

7:30 a.m. -Registration and Visit with Exhibitors 4:00 p.m. Municipal Auditorium

7:30 a.m. -Breakfast with the Exhibitors 8:30 a.m. Municipal Auditorium

"The \$500,000 Practice" 8:30 a.m. -Dean L. Peyton, D.O. 9:15 a.m.

"Structural Consultation and Treatment Service" 9:00 a.m. -11:00 a.m. Municipal Auditorium

(anyone interested in participating in this service, please contact Dr. David Teiltelbaum;

817/738-9275)

"Diabetes Mellitus in the Elderly" 9:15 a.m. -Christian S. Hanson, D.O. 10:00 a.m.

10:00 a.m. -Visit with the Exhibitors 11:00 a.m Municipal Auditorium

"Mucocutaneous Manifestations in the Immuno 11:00 a.m. -Compromised Patient" 11:45 p.m.

Charles J. Stephens, D.O.

11:00 a.m.

11:45 a.m.

11:30 a.m	Buses Leave for Gateway Hills Championship Golf Course, Lackland AFB
11:30 a.m 2:00 p.m.	ATOMA Installation Luncheon St. Anthony Hotel
11:45 a.m 12:30 p.m.	"Early Office Recognition and Intervention of Drug and Alcohol Dependence" Jan Swanson, D.O.
12:30 p.m 2:00 p.m.	Lunch with the Exhibitors Municipal Auditorium
1:00 p.m 2:00 p.m.	Texas Academy of Osteopathy Meeting Municipal Auditorium
2:00 p.m 2:45 p.m.	"Unique Osteopathic Philosophy of Practice" Gregory A. Dott, D.O.
2:45 p.m 3:30 p.m.	"Computer Utilization by Office Physicians" Thomas A. Naegele, D.O.
3:30 p.m 4:15 p.m.	"Computer Based Diagnostic Tools" Frank Papa, D.O.
3:30 p.m 5:30 p.m.	ACGP Pacer's Meeting St. Anthony Hotel
4:15 p.m 5:00 p.m.	"Medical Computer Laboratory" Dr. Naegele and Dr. Papa
6:30 p.m 7:30 p.m.	President's Night Reception St. Anthony Hotel
	President's Night Banquet/ATOMA Fund Raiser St. Anthony Hotel
Saturo	day, May 4
7:00 a.m 8:30 a.m.	"Osteopathic Manipulative Workshop" Timothy H. Werner, D.O., Program Chairman Municipal Auditorium
7:30 a.m 12:00 noon	Registration and Visit with Exhibitors Municipal Auditorium
7:30 a.m 8:30 a.m.	Breakfast with the Exhibitors Municipal Auditorium
7:30 a.m 9:00 a.m.	ATOMA Board of Trustees' Breakfast/Meeting St. Anthony Hotel
8:30 a.m 9:15 a.m.	"Hyperlipidemia Update and HDLs" Len Scarpinato, D.O.
9:00 a.m 11:00 a.m.	"Structural Consultation and Treatment Service" Municipal Auditorium
9:15 a.m 10:00 a.m.	"Acute Epiglottitis: Recognition and Management" Cecil Fincher, D.O.
10:00 a.m 11:00 a.m.	Visit with the Exhibitors Municipal Auditorium
10:30 a.m.	Buses leave for "Arts and Flowers" Tour
2:30 p.m.	Tour for Spouses and Guests

"Indications for E.P. Testings (Electrophysiology)

"Musculoskeletal Rehabilitation of the Low Back"

in a Control Environment' Robert J. Chilton, D.O.

James W. Simmons, M.D.

12:00 noon - 4:00 p.m.	TOMA Board of Trustees' Luncheon/Meeting St. Anthony Hotel
12:30 p.m 2:00 p.m.	Lunch on your own
2:00 p.m 2:45 p.m.	"Fibromyalgia Syndrome Update" Bernard Rubin, D.O.
2:45 p.m 3:15 p.m.	"Industrial Athlete" Paul S. Saenz, D.O.
3:15 p.m 3:45 p.m.	"Overuse Injuries in Sports and Industry" Mitchel D. Storey, D.O.
3:45 p.m 4:15 p.m.	"Hi-Tech Fitness" Bob Goldman, D.O.
4:15 p.m 4:45 p.m.	Panel Discussion on Sports Medicine Dr. Saenz, Dr. Storey, Dr. Goldman
6:30 p.m	Fun Night Party Buses leave for "Sea World of Texas"

Sunday, May 5

8:00 a.m. -"OMT Hands-On Workshop" "Hands-on Workshop Concentrating on Areas 12:00 noon Common Difficulties for the General Practition Department of Manipulative Medicine Texas College of Osteopathic Medicine

Risk Management Seminar St. Anthony Hotel

8:00 a.m. -"Update on Proposed Legislation Pertaining In 9:00 a.m. Controlled Substances and Dangerous Drug Laws and Rules of the Texas Department of Public Safety' Capt. Adolph Thomas, Narcotics Service

9:00 a.m. -"How a Physician Can Avoid the Pitfalls of 12:30 p.m. Professional Liability Suits" Michael G. Victor, D.O., J.D.

12:30 p.m. -"Update of the Medical Practice Act and Rules the Texas State Board of Medical Examiners Michael Young, J.D., Staff Counsel, TSBME



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11:00 a.m. -11:45 a.m.

March 199

Improving Quality Of Medical Care Statewide — The Medicare Experience

The Texas Medical Foundation (TMF) is sponsoring a two-hour "Quality Assurance" Seminar in conjunction with the TOMA's 92nd Annual Convention & Scientific Seminar on Thursday, May 2, from 2:00 - 4:00 p.m. at the Municipal Auditorium in San Antonio.

The TMF is the Peer Review Organization for the State of Texas. With a contract from the Health Care Financing Administration (HCFA) for Medicare review and the Department of Defense for CHAMPUS, the TMF has the responsibility of reviewing the quality of care being provided to patients admitted to Texas hospitals.

William Jones, D.O., a general practitioner, of Georgetown, Texas and Charles Cain, M.D., an internist, of Dallas, are the speakers for this quality assurance program. Dr. Jones serves on the statewide Quality Assurance Committee for the TMF. In this capacity, he reviews many medical records regarding quality of care issues. Dr. Cain is Director of Quality Medical Assessment for the TMF and is chairman of the Statewide Quality Assurance Committee. In addition to his responsibilities in quality review for TMF, Dr. Cain is Chairman of the Quality Assurance Committee of the American Medical Peer Review Association. The topics to be discussed are:

"Most Common Quality of Care Issues Identified Statewide"

During its six year experience, the TMF has identified the most common quality of care issues related to Medicare and CHAMPUS patients in Texas. A discussion of these issues should assist physicians working with their own medical staffs to be alert for the identification of these same issues.

"How Quality of Care Issues are Identified Through the Use of Generic Quality Screens"

The initial screening of a case with nonphysician reviewers applying generic quality screens identifies cases that need further review by a physician. Though only practicing physicians can make a determination that a quality issue exists, knowing what these generic quality screens are should assist physicians to know what issues are being screened.

"How Specific Quality of Care Issues Are Reviewed"

The process by which a physician consultant reviewing for the Texas Medical Foundation looks at a medical record will be discussed. This segment should assist the physicians to review records in their own hospital as well as develop appropriate documentation in their own medical records.

"What Happens When Quality of Care Issues Are Identified"

The TMF quality assurance process will be briefly described. The opportunities for due process will particularly be emphasized.

"How Can Individual Physicians and Medical Staffs Prevent Confirmed Quality of Care Issues In Their Facility"

A description of a suggested quality assurance process that could be used in hospitals will be discussed.

Following the expertise of Dr. Jones and Dr. Cain, a panel discussion will wrap-up the program. The panel will include: Donald M. Peterson, D.O., of Dallas, Chairman of the Regional Quality Assurance Program of the TMF; Daniel Schmidt, D.O., of Pearsall, former member of the Statewide Quality Assurance Committee and, presently, is a member of the Regional Quality Assurance Committee in San Antonio; and Dr. Jones.

Those participating in this quality assurance program are encouraged to ask the Osteopathic Physician Leadership of the TMF questions about the quality assurance program of the TMF.



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18/Texas DO

Illness Symptoms Experienced By The Homeless

By Jana Nichols, RN, MS, FNP-C

EDITOR'S NOTE: Janna Nichols is the daughter of Richard E. Nichols, D.O., of Austin, and is a master prepared family nurse practitioner at the office of Harold D. Lewis, D.O. in Austin. Anyone desiring more information referencing this article, please contact Miss Nichols at the Family Practice Clinic, 6104 S. First, Suite 102, Austin, Texas 78745.

According to Miss Nichols, this study attempted to examine health problems of the homeless and their perceptions of health by ascertaining what illness symptoms they report. Homeless individuals (N = 50) were interviewed and the illness symptoms they reported were described. Self-ratings of health were studied in regard to influence on reporting of illness symptoms.

Findings revealed a high frequency of reported illness symptoms related to mood, nose and throat, general, cardiovascular, respiratory, digestive, musculoskeletal, and eye categories. Greater numbers of symptoms were reported by subjects who rated their health fair to very poor.

The symptoms reported by subjects' in this study reflect the kinds of health problems experienced by the homeless reported in previous research. The homeless experience a compromised level of health as demonstrated by their self-rating of health and the number illness symptoms reported.

Past health related research on the homeless has focused primarily on the prevalence of mental illness in this population (estimated to range between 20% to 50%). Cities that provide health care services for this population have compiled data concerning the physical health of the homeless. These studies have revealed high prevalence rates of respiratory disease, peripheral vascular disease, dermatological problems, infectious disease, and trauma.27 The majority of this information was collected by reviewing medical records, self-reports of illness conditions and/or self-ratings of health. Gelberg and Linn compared self-reports of illness with objective measures of health and concluded that research relying only on reports of illness by homeless adults may underestimate the existence of health problems in the homeless population.8

To date no published study has examined the homeless person's perception of health in terms of what the individual recognizes as a symptom of illness, thereby necessitating the need to seek health care. Gelberg and Lim have already documented that homeless individuals are poor historians regarding the existence of illness states. If we are to provide health care for this population we need to know what their health problems are. However, in order to meet their first priority health care

needs, information concerning their perception of their health status is needed.

As a beginning step, this study attempted to examine the health problems of the homeless and their perceptions of health by ascertaining what illness symptoms they report and their self-rating of health.

Methods

Fifty subjects were selected from the men's, women's and outdoor emergency shelters in Phoenix, Arizona. Subjects were approached in a systematic manner and asked to volunteer to participate. Demographic data and self-rating of health were obtained. A health history questionnaire was utilized to obtain information concerning subjects' health problems. Data was collected through individual private interviews.

Results

Fifty homeless individuals were interviewed, twenty-five males and twenty-five females. The age of the subjects ranged from 16 years to 60 years the majority of subjects (76%) were between the ages of 16 and 35 years. The mean age of all subjects was 31.5 years. Forty-one of the homeless individuals were Caucasian, eight were Indian and one was Black.

The majority of subjects (74%) had been homeless for less than one year. Only nine of the subjects were employed. Of the 41 subjects who were unemployed, 32 stated they were looking for work. As a group, the 50 subjects reported 104 of 106 symptoms. Subjects reported a range of 5 to 85 symptoms, the mean number of reported symptoms being 29.6. Table 1 lists the subjects' reports of current symptoms according to body system category and the most frequently reported symptoms (reported by 40% or more of the subjects).

Those categories of symptoms most frequently reported by subjects (72% and more) were: mood, nose and throat, general, cardiovascular, respiratory, digestive, musculoskeletal, eye and female body systems, the least reported symptom categories (64% and less) were urinary, skin, ears, neurological, mouth, female, head and neck, and male body system categories. The two symptoms reported most frequently (64%) were gained/

lost more than 10 pounds and more thirsty lately. Eighteen percent of the subjects reporting a weight change reported an increase of 10 pounds, while 34% of the subjects reported a weight loss, 12% of the subjects reported an unknown weight change.

The relationship between homeless persons' selfratings of health and reported illness symptoms was explored. Subjects rated their health using a 5-point scale; 1 = excellent health, 2 = good health, 3 = fair health, 4 = poor health, and 5 = very poor health. On the average subjects reported their health between good and fair (X = 2.5). More than half of the subjects' (54%) reported their health excellent to good. As subjects' rating of health digressed from excellent to very poor, the frequency of reporting symptoms increased (p = .0005). Also, as subjects rating of health digressed from excellent to poor, the mean number of symptoms reported increased (p = 0.008). Table 2 shows the number of subjects, range and mean numbers of symptoms reported for each rating of health, Self-ratings of health digressed from excellent to very poor as the number of reported symptoms increased in the following 11 body system categories: general, head and neck, ears, mood and urinary (p > 0.05), nose and throat, respiratory, digestive, cardiovascular, musculoskeletal, and eyes (p < 0.05).

TABLE 1 Number of Subjects Reporting Symptoms According to Body System Category and Associated symptoms in Each Category reported by more than 40% of the subjects.

Rank Order	Body System Category <u>Subjects</u> and symptoms	Reporting N = 50	Symptoms
1	MOOD	49	98
	Shy or sensitive	31	62
	Worries a lot	29	58
	Lonely or depressed	27	54
	Difficulty relaxing	26	52
	Annoyed by little things	25	50
	Nervous with strangers	22	44
	Difficulty making decisions	20	40
2	NOSE AND THROAT	47	94
-	Hoarse voice	28	56
	Congested nose	24	48
	Sneezing spells	22	44
3	GENERAL SPELIS	45	90
e siste	Gained or lost more than	40	90
	10 pounds	32	64
	More thirsty lately	32	64
	Sleeping difficulty	23	46
	Exhausted or fatigued	22	44
2	CARDIOVASCULAR	38	76
	Dizzy spells	23	
	Chest pains	20	46
5	RESPIRATORY	37	
1	Coughing spells	21	74
	Coughs up phlegm		42
	DIGESTIVE	37	42
	Heart burn		74
5	MUSCULOSKELETAL	16	32
9	Back and Shoulder pains	37	74
	Painful feet	23	46
		22	46
6	Aching muscles or joints EYES	21	42
0		36	72
	Slurry vision Sees halo	23	46
7	URINARY	21	42
1		32	64
7	Night urinary frequency	23	46
8	SKIN EARS	32	64
8		30	60
9	NEUROLOGICAL	30	60
9	MOUTH	28	56
	Dental problems	25	50
10	HEAD AND NECK	20	40
11	FEMALE	N= 25	
	Heavy bleeding during periods	22	88
	Abnormal last menstrual periods	od 10	5.2
22	MATE MATER	100	40

Table 2. Number of Subjects, Range and Mean Humber of Symptom
Resolted for Each Rating of Health

Rating of Number of Subjects Range of Symptoms Symptoms Report

1 - Excellent 10 5-25 16

16-75

26

34

very	Poor	-	
_			_

Pair

Poor

Comment

The data in this study came from self reports h homeless people. The population, being selected by convenience, is weighed toward those homeless individua seeking assistance with food and shelter (not thou "camped" in the outskirts of the city). Therefore generalization made from this study are limited to com parable groups of homeless individual, However, Phoen offered a unique situation where both indoor and our door shelters are available. Persons residing at the our door shelter were some of the very individuals wh previously lived on the streets. These individuals rare sought assistance other than a place to reside with the belongings without being disturbed. Furthermore, the subjects were selected at random from among person who were not seeking health care at the time, thus the findings are more likely to be an accurate representation of the illness symptoms experienced by the homeles population versus data derived from treatment setting

The intent of this study was to describe the illnes symptoms experienced by the homeless. Illness symptoms reported by homeless subjects were described, and the relationship with self-ratings of health was examined Findings revealed a high frequency of reported illne symptoms related to mood, nose and throat, general, ca diovascular, respiratory, digestive, musculoskeletal, and eye categories. These findings reflect the kinds of health problems experienced by the homeless reported in the literature.

The presence of symptoms in the mood category for the homeless population can be attributed to seven causes. A large portion of the homeless population comprised of the chronic mentally ill. The prevalence of major mental illness, alcoholism, and drug use the homeless population have all been well docu mented. 10012 It is not surprising then to find reports 0 symptoms in the mood category. Specific to this study results showed that 66% of the subjects reported dru use and 20% reported alcohol use. However, only three subjects admitted to substance abuse. The interaction be tween psychiatric illness and being homeless cannot b overlooked as a contributing factor in explaining sub jects' reports of symptoms in the mood category Unresolved psychiatric problems may result in home lessness: conversely, homelessness may cause symptom of mental illness.13 Supporting this idea, Breakey, et. al concluded that homeless people experience a highe prevalence of anxiety, depression and phobias

compared to schizophrenia or bipolar disorder. This was found to be true for this study also; the majority of subjects reporting symptoms in the mood category reported symptoms of being sensitive, worried, depressed, annoyed by little things and nervous.

The high reporting rate of symptoms in the nose and throat, general, cardiovascular, respiratory, digestive, musculoskeletal, and eye categories are consistent with the high prevalence rates of cardiovascular disease (hypertension, heart attack), respiratory disease (pneumonia, tuberculosis, asthma, bronchitis and cigarette smoking), acute gastrointestinal disease, physical disability, arthritis and dental problems already documented in the literature. 1,7,10,13-11 Homeless women experience a high prevalence rate of menstrual and menopausal problems as well as sexually transmitted diseases." Similarly, the female subjects in this study reported many symptoms in the female category. Overall, the reporting of symptoms in these categories could be exacerbated or caused merely by the homeless individual situation; living conditions: lack of protection from the environment, over crowded shelters, lack of transportation, poor sleeping accommodations, poor nutrition, and cigarette smoking.

The relationship between self-ratings of health and the reporting of illness symptoms was investigated to determine the health status of the homeless population since self-assessment of health is one of the best indicators of general health status.2 Homeless subjects report a low perception of health in conjunction with a high frequency of illness symptoms reported. Similarly, Gelberg and Linn found that ratings of health were related to reports of physical symptoms and consequently identified homeless persons in poorest physical health by using selfratings of health status.8 Also, more homeless subjects rate their health poorer than do members of the general population." Concluding from this, the homeless population experience a lower level of health than the general population. This can be explained by the advent of recent life change experienced by homeless individuals as well as the emotional problems discussed previously.

In conclusion, the homeless experience a compromised level of health as demonstrated by their self-rating of health and the number of illness symptoms reported. Accessible health care needs to be provided where the homeless congregate. Clinics providing health care aimed at the homeless need to address their concerns. In this way homeless individuals will present at clinics for relief of symptoms troublesome to them (congested nose, painful feet or tooth ache) and can concomitantly receive care for other health problems (hypertension, tuberculosis and STDs).

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Two Faculty Members Celebrate 20 Years at TCOM





Mary Schunder, Ph.D.

Flizabeth Harris Ph.D.

Two members of the original faculty at Texas College of Osteopathic Medicine were honored for their 20 years of service at the Fort Worth medical school during a service award ceremony in January. The distinguished faculty members, Mary Schunder, Ph.D., and Elizabeth Harris, Ph.D., have served in many different positions.

Schunder served as chair of the Department of Anatomy from 1970-72, then reassumed the post from 1975-82. She served as associate dean for student affairs from 1987-89, then returned to a full-time position as an associate professor in the Department of Anatomy and Cell Biology. Schunder was an anatomical representative to the Anatomical Board of the State of Texas from 1970-79.

Schunder also serves as an associate professor to the Department of Biology at the University of North Texas.

She is a member of Sigma Xi, the Southern Society Anatomists, Phi Sigma, American Association Clinical Anatomists and numerous other profession societies.

Harris was not only the first faculty member hires TCOM, but also the first chair of the curriculum comittee, first chair of the admissions committee, and first assistant dean and coordinator of the first bascience programs for TCOM at UNT. When developed the TCOM immunology course in 1971, the were only five medical schools with this course in the curriculum.

Harris served as chair of the Department of Microbiology and Immunology from 1970-83 during school's formative years. She was a member of American Board of medical Microbiology, which the tifies clinical laboratory directors, from 1978-90.

Harris has been named to Who's Who Amo-American Women, and Who's Who In Technolo Today. She has been awarded fellowships from the Ntional Science Foundation and the National Institute General Medical Sciences. She was recently named of Texas Wesleyan University's 20 most outstandwomen graduates as part of the university's centencelebration.

Harris is a member of the American Society Microbiology and the ASM's Public Service and Adelication Committee, and has been a consultant Micro Laboratories and Lennox Industries, Inc.

In Memoriam

James Gordon Dowling, D.O.

James Gordon Dowling, D.O., of Grandview, Texas, passed away February 2, 1991. He was 61 years of age Funeral services were held February 4 at St. Joseph's Catholic Church in Cleburne under the direction of Clayton Kay Funeral Home in Grandview. Burial was in Grandview Cemetery.

Dr. Dowling was born in Dearborn, Michigan. He served in the Navy during World War II. He received his DO. degree from Chicago College of Osteopathic Medicine in 1966 and interned at Chicago Osteopathic Hospital.

Dr. Dowling had lived in Grandview for 11 years at the time of his death. He was a member of the AOA and had been a member of TOMA from 1970 through 1988,

Memorials may be made to Operation Blessing in Cleburne or Focus on the Family James Dobson Ministries. Survivors include his wife, Norma Dowling of Grandview; three sons, James Gordon Dowling, Jr., of Grandview, Charles Jeffrey Dowling of Columbus, Ohio, and Steven Edward Dowling of Grandview; two daughters. Leisel Marie Moseley of Munday and Meredith Lynn Dickens of Alvarado; a sister, Yvonne Kahn of Milwauker, and eight grandchildren.

TOMA extends condolences to the family and friends of Dr. Dowling,

Healthcare Associations Offer Medical Assistance to Wounded Desert Storm Troops

The American Osteopathic Association (AOA) and the American Osteopathic Hospital Association (AOHA) recently offered the use of AOHA member hospitals and AOA member physicians to treat troops wounded during Operation Desert Storm.

In letters sent to President George Bush, Secretary of the Veterans Affairs (VA) Edward Derwinski, and Secretary of the Department of Defense (DOD) Richard Cheney, the two national healthcare associations offered hospital beds and expert medical attention to returning American troops wounded while fighting for the liberation of Kuwait

"The nation's 30,000 osteopathic physicians together with the 103 AOHA osteopathic hospitals stand ready to assist the VA and the DOD," said Mitchell Kasovac, D.O. president of the AOA.

DOD policy calls for troops injured in combat to be returned to a hospital in, or near, their hometown for treatment. The International Physicians for the Prevention of Nuclear War predicts there could be as many as 125,000 casualties. The Cambridge, Mass. group bases its figure on projections from the Center for Defense Information, a Washington, D.C.-based group of retired military officers.

"We hope this prediction never rings true, but if it does, the DOD may need extra hospital beds. We are prepared to provide 17,700 AOHA member hospital beds for any wounded troops fighting in the Desert Storm operation," said Gerald Selke, FCOHE, chairman of AOHA

Kasovac pointed out that currently there are 1,373 D.O. physicians serving in the military in all capacities and medical specialties.

Across the nation, the AOA, which represents more than 30,000 osteopathic physicians, promotes the public health, encourages scientific research, and acts as the accrediting agency for osteopathic hospitals and colleges.

Headquartered in Washington, D.C., the AOHA is the only organization devoted exclusively to serving the country's osteopathic hospitals through advocacy, education and communication.



mounces the opening of its new, state-of-the-art GI Lab.

ur new GI Lab is designed for convenience and efficiency, with the highest standards of care. Services include:

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- · Four-bed recovery room
- · Separate cleaning area
- · Endoscopy video
- · ERCPs, conducted with a radiologist
- · Experienced GI nurses
- · Universal precautions practiced on every case
- · Waiting room conveniently located

effrey A. Mills, DO, Board Certified in Gastroenterology, serves as Medical Director. He is assisted in the lab by Ruth Reed, RN; Gail Geserick, RN; Melissa Garrett, RN; Brenda Wood, RN: and Kathy Edwards, RN, from his office.

To learn more about this new service, or to refer a patient, contact Dr. Mills at his office at (817) 283-3545.



Jeffrey A. Mills, DO

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Now is an ideal time for I.C. System to contact your debtors. Why? Because tax season is the time many debtors will be receiving income tax returns. With a source of funds readily available to debtors, your collection agency may be able to settle many of your past-due accounts now.

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TOMA endorses the services of I.C. System, Inc., as an effective and ethical debt collection program. Their style of collecting will not alienate your patients. I.C. System is the largest privately-owned debt management company in the country and is endorsed by over 1,000 professional and business associations, over forty-five right here in Texas. To learn more, contact the Association at (817) 336-0549. You'll be glad you did!

Osteopathic Medical Center **Elects Board Members**



Jav E. Sandelin, chairman of the board of Osteopathic Medica Center of Texas, has announced the election of Paul Saperstein, D.O. the medical center's board directors.

Re-elected to the fifteen-member board were Warwick J. Drakeford C.P.A., and W. Scott Wysong, III Votes were cast January 22 at n medical center's corporate annu-

meeting. Board members serve staggered three-year terms

Also on the board are Sandelin; Jay G. Beckwith, D.0. David M. Beyer, D.O.; Sam W. Buchanan, D.O.; John W. Burnam; William M. Jordan, D.O.; State Representation Gibson D. Lewis; Barclay R. Ryall; Irwin Schussler, Do. and Herman F. Stute, David M. Richards, D.O., president of Texas College of Osteopathic Medicine, and Phillip Sowa, chief executive officer of OMCT, serve the hoar as ex-officio members.

Osteopathic Medical Center of Texas, the large osteopathic institution in the state, is a 265-bed general and acute care facility.

"Best system, best service and best support!"



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The Control-o-fax Computer System Lee Woods — Office Manager, Orthopaedic Surgery, San Antonio, TX

"We have been most impressed and appreciative of your training and support as we continue to expand our use of the

Control-o-fax Computer System." Gail D. Stockman MD, Pulmonary and Critical Care Medicine, Longview, TX

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Jerelyn Duncan - Office Manager, Family Practice, Center, TX

The training we received from Mifax eliminated all initial fears of automation. We would recommend the Control-o-fax Computer System to any office considering computerization. Joy Leach — Business Administrator, North Hills Family Practice, Ft. Worth, TX

"This is the second computer system for our office...great service, great performance and great support. Family Health Center, Rio Grande City, TX

"The Control-o-fax Computer System solved all my insurance problems. The training and support has been outstanding! J. Ahrens - Office Manager, Family Practice, Caldwell, TX

ATOMA NEWS

By Deidra Froelich, Ph.D. Auxiliary News Chairman

Rita Baker, ATOMA president-elect and sole proprietor of Bowie Speech and Hearing, Inc., announces that she is having a new building constructed at 5013 Rvers in Fort Worth.

The new facility will have 1,940 sq. ft. with three therapy rooms; audiology suite; bath for the handicapped; therapist office room which will house a minimum of eight therapist; and a full kitchen which will enable them to do ADL skills for rehabilitation of stroke patients. The new facility will be wired for computers with a computer therapy room. They will also be able to do augmentative communication skills with handicapped children and adults.

Rita contracts with Bencor Hospital in Mansfield as well as 12 home-health care agencies for speech therapy. Osteopathic Medical Center of Texas in Fort Worth, and North Hills Medical Center in Fort Worth. They are the ONLY Medicare approved state licensed speech and hearing clinic in Texas.

Congratulations to Rita!

INCREASE YOUR INCOME BY AT LEAST \$100 PER MONTH OR THIS MEDICARE VIDEOTAPE IS FREE!

For the first time ever Medical Consultants of Texas is offering their highly popular videotape "Playing Medicare's Game to Win" to TOMA members for a special price of \$99 (+\$8.17 sales tax).

The "Billing & Collections" videotape can be purchased for an additional \$75 for a total of \$189.40 for the set of two (tax included.)

Don Self. President of MCT, is considered one of the nation's leading experts on Medicare billing and billings and collections.

If, after receiving these tapes and implementing the tips contained therein, you do not increase your income by at least \$100 per month, you may return the tapes for a full refund

Call 800-256-7045

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Osteopathic Medical Center Of Texas Announces **New Chief of Staff**



Robert B. Hames, D.O., has been elected chief of staff of Osteopathic Medical Center of Texas, Board Chairman Jay E. Sandelin announced January 24...

Hames, a general practitioner here, has been a member of the OMCT medical staff for 16 years. As chief of

staff his responsibilities include directing the medical staff, chairing OMCT's executive committee and chairing OMCT's general staff meetings.

Hames received his undergraduate degree at the University of North Texas prior to completing his medical education at the College of Osteopathic Medicine and Surgery in Des Moines, Iowa. He served his internship at OMCT. Hames is a member of the American Osteopathic Association, Texas Osteopathic Medical Association, American Academy of Family Physicians and the American College of General Practitioners.

AOA Reschedules GME Conference

The American Osteopathic Association (AOA) has rescheduled the conference on osteopathic graduate medical education leadership for September 13-15, 1991. Major funding for the conference is provided by The Upjohn Company.

The conference's theme is "Enhancing Quality and Competitiveness in Osteopathic GME," according to Michael Opipari, D.O. and chairman of the conference steering committee. He added that the format will be similar to that developed last year, which combined formal presentations and workshops to allow input from all participants. The conference will be held at the Hyatt Regency O'Hare, near Chicago.

The conference is open to all residency program directors and directors of medical education, as well as to those who were invited last year, Opipari said. Expected participants include members of specialty college evaluating committees, presidents and deans of osteopathic colleges and others involved with osteopathic medical education.

Details and registration materials will be made available in March. Any further questions, contact Helen H. Baker, Ph.D. at 312/280-5840 or Chris Martin at 312/280-5857.

March 1991 Texas DO/25

TMF Announces HCFA Policy Change

The Texas Medical Foundation (TMF) has informed TOMA of a directed change order they received from the Health Care Financing Administration. TOMA wishes to inform you of such program changes which may have an effect on your medical practice.

BACKGROUND: TMF has designated ten procedures (listed below) which require prior authorization and the assignment of a treatment authorization number. When the physician obtained the treatment authorization number prior to performing one of the ten procedures for a Medicare patient, TMF would review five percent of the cases in a retrospective validation sample. This held true even if the treatment authorization number was received postadmission but preprocedure.

POLICY CHANGE: The new directive requires the physician to obtain the authorization and treatment number prior to an inpatient admission or prior to an outpatient procedure in order to keep the case in the five percent validation sample. When a physician obtains postadmission (inpatient) or postprocedure (outpatient) authorization on or after February 1, 1991, TMF will select one hundred percent of the cases for retrospective review.

Hospital and physician payments will not be delayed as a result of this new directive; however, the percentage of cases undergoing retrospective review for the designated procedures will be significantly increased.

WHAT CAN A PHYSICIAN DO? TOMA encourages physicians to call TMF prior to a Medicare patient's hospital admission for one of the ten procedures or prior to performing one of the procedures on an outpatient basis. A physician should call for authorization if he or she has a reasonable expectation that one of the procedures will be necessary. Treatment authorization cannot always be obtained prior to a patient's inpatient admission or outpatient procedure; however, by calling TMF in advance whenever possible, the physician will keep more cases in the five percent validation sample.

For more information, contact the TMF communications department at 1-800-999-9216.

Designated Procedures

- · carotid endarterectomy
- · hysterectomy
- implantation or reimplantation of permanent cardiac pacemaker
- · coronary artery bypass graft
- major joint replacement (hip and knee; excludes joint replacement for new/acute hip fractures)
- · cholecystectomy

- · transurethral prostatectomy
- CATARACT EXTRACTION (except those per formed in physicians' offices)
- · percutaneous transluminal coronary angiopla-
- laminectomy

Rita Baker To Be Installed As ATOMA President

Mrs. Mark A. (Rita) Baker, of Fort Worth, wil be installed as president of the Auxiliary of the Tea Osteopathic Medical Association, at its Annual Installation Luncheon, Friday, May 3, 1991, a TOMA's 92nd Annual Convention and Scientifis Seminar in San Antonio.

Mrs. Baker is the sole proprietor of Bowie Speech and Hearing, Inc. which is a full service Speech and Hearing Clinic and is a state licensed facility and Medicare approved. Her responsibilities other than administrative have been to set up the Dysphagis programs within the hospitals, provide supervision and instruction to speech pathologists on Dysphagis Management and provide evaluation and treatment for speech and language disordered patients ranging in age from pediatrics to geriatrics.

Prior to the opening of the Bowie Speech and Hearing, Inc., she contracted with Cook/Fort Worth Children's Medical Center as a Speech Pathologist.

Mrs. Baker's goals for her upcoming presidential term are: 1) to work on increasing membership by educating TOMA members and their spouses on how ATOMA serves the profession at the state and national levels; 2) to work towards getting the state convention more oriented to the families participation since quality family time is becoming increasingly limited; 3) to work on increasing pride in osteopathy within our profession which will be demonstrated in our contact with non-osteopathic individuals; and 4) to continue to support ATOMA's resolution to the national level regarding the changes in membership statues to allow persons interested in promoting osteopathy to be members of the auxiliary.

Physician Practice Marketing Kit Now Available to All D.O.s



Responding to its members' desire for detailed information on practice marketing, the AOA is now offering a physician marketing kit with the apt tagline "The Osteopathic Physician — treating people, not just symptoms!"

Produced in conjunction with nationally-known marketing company Garfield-Linn & Co., the physician marketing kit is designed to not only increase the visibility of each D.O. who uses it, but to enhance the work of the AOA's national public relations program.

"Through this kit, physicians will be able to tap into marketing expertise that they might not be able to afford on their own," said Edward A. Loniewski, chairman of the AOA's committee on public relations.

This expertise takes the form of AOA executive and public relations staffs, AOA leadership and D.O. experts from various practice areas who contributed to the kit. Loniewski added that this kit is also special because the brochures come in ample quantities, ready to distribute to patients.

Physicians purchasing the kit will receive:

- · 750 four-color brochures
- · 500 Workplace Wellness brochures
- · 500 Your Body's Structure & Health brochures
- 500 Live Better Longer brochures
- Three full-color posters that emphasize the qualities that set D.O.s apart
- Four newspaper ads that can be customized to individual practices

- · One literature rack to hold the brochures
- · One Omnibus Ad reprint
- One "How-To-Manual" that gives step-by-step instructions on how to use these materials effectively

For an additional fee, physicians may purchase supplemental kits on sports medicine, child care, preparing for surgery, and obstetrics/gynecology.

"We feel we've responded to a need our members, and the profession, have clearly communicated," said Loniewski.

To order a kit, call Garfield-Linn & Co. at 800/348-3706. Visa and Mastercard will be accepted.

Northeast Community Hospital Announces 1991 Officers



Northeast Community Hospital, Bedford, Texas, has announced the selection of Jeffrey A. Mills, D.O., as the 1991 hospital chief of staff.

Dr. Mills received his undergraduate degree from Purdue University before graduating from the Chicago College of Osteopathic Medicine. He

served his internship at the Chicago Osteopathic Hospital and is board certified in gastroenterology and internal medicine.

Other Northeast appointments include: Bennett T. Gardner, D.O., vice chief of staff; Ruth E. Carter, D.O., secretary/treasurer; Robert R. Crawford, D.O., immediate past chief of staff; Richard D. Magie, D.O., staff parliamentarian; Archie R. Barrett, D.O., chairperson of OB-GYN/pediatrics; Dale H. Brancel, D.O., chairperson of surgery; Deborah D. Brown, D.O., chairperson of general practice; Richard J. Feingold, D.O., chairperson of internal medicine; Michael Podolsky, D.O., chairperson of radiology; Wayne E. Schuricht, D.O., chairperson of emergency; J. Michael Stanton, D.O., chairperson of anesthesiology; and Frank H. Swords, D.O., chairperson of orthopedics.

TOMA congratulates the new officers.

March 1991 Texas DO/27

Living Wills Help Patients Retain Responsibility for Their Medical Treatment

While the recent case of Nancy Cruzan and her family's battle with both the Missouri and U.S. Supreme Courts have focused much attention on advance directives such as living wills and durable powers of attorney, very little knowledge exists about these documents among the general public.

"If the goal for most patients is to retain responsibility for their healthcare, even in the case of incapacitation or terminal filmess, living wills and durable powers of attorney can achieve this objective," said Marcelino Oliva, D.O. Dr. Oliva recently submitted testimony to a Senate Subcommittee of Medicare and Long Term Care on the importance of living wills.

A living will is a document in which you state the types of treatment you want and how far you want them to go. It's important to be as specific as possible because vague language or direction leaves treatment decisions up to the doctor or loved one, he said.

Additionally, a living will does not take effect until you're terminally ill, and the definition of "terminally ill" varies from "imminent death" to "death within several months," depending on the state in which you live.

A durable power of attorney for healthcare delegates responbly to someone you trust, for all healthcare decisions, when you're not fit enough to make them. One characteristic is that the person you appoint can make decisions whenever you're mable, not just when you're terminally ill. Oliya said. It's important to give a durable power of attorney healthcare to someone who knows your wishes and is prepared execute them.

If you choose to execute both a living will and a dun power of attorney for healthcare, you may be able to as being forced by the courts to stay on life support (unless so state in your living will), and your relatives won't have make any life or death decisions for you without your pi consultation.

To aid people in this predicament, Congress, as part of Omnibus Budget Reconciliation Act of 1990, is now requing hospitals and other healthcare providers to make patie aware of the existence of these health directives.

Specifically, the healthcare provider must ask the pair about the existence of either a living will or durable posof attorney already executed by the patient; provide information to the patient about relevent state law governing advadirectives; and outline to the patient the hospital's or heal provider's written policy concerning advance directives. To law won't take effect until November of 1991.

"I recommend seeing an attorney for advice on completa a living will or durable power of attorney," said Dr. Olia "And, make sure your doctor has copies of both docume and that your family and friends are aware they exist and withey contain."

NEW MEXICO OSTEOPATHIC MEDICAL ASSOCIATION 54th Annual Convention and Trade Show

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TOPICS:
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Urology, The Eye, Pediatrics, and a
Special Section on Native American Medicine



For registration information, call or write

NMOMA Convention Information P.O. Box 3096 Albuquerque, NM 87190-3096

(505) 828-1905

Texas State Board of Insurance Warns of Unauthorized Insurers

Buying medical malpractice coverage from unlicensd insurers can be hazardous to the financial well-being if health care providers, warns the Texas State Board of assurance.

"Physicians, nurses, hospitals and other health care roviders need to be alert to the significant dangers of abtaining their medical professional liability insurance rom illegal operators," said Board Member Richard F. Tevnolds.

"Insurers who are on the up-and-up obtain licenses, when it o regulation and participate in state guaranty runds. Those who choose to be outlaws very likely won't be around when you need them to write a claim check. And a guaranty fund won't be there to act as a safety net by paying the claim."

Unauthorized insurers have sold medical professional ability insurance illegally to more than 200 Texas physicans and other health care providers. In some instances, cospitals have unwittingly accepted policies written by nauthorized insurers as meeting their requirements that hysicians using their facilities provide evidence of nedical malpractice coverage. In at least one case, an ntity unlicensed by any state has advertised malpracice insurance in a medical journal that circulates nationwide.

The Texas Attorney General, acting at the request of he State Board of Insurance, obtained temporary injunctions in 1990 against two unlicensed carriers: Casualty Assurance Risk Insurance Brokerage (CARIB) of Guam and Trans-Pacific Insurance Co. of the Federated States of Micronesia. In reality, Trans-Pacific and CARIB are he same entity; CARIB changed its name to Trans-acific early in 1990.

CARIB and Trans-Pacific sold insurance illegally to lexas health care providers through Medical Liability Jurchasing Group Inc. of Jeffersonville, Indiana, which hever qualified as a purchasing group under Texas law. n addition to the Attorney General's action, the Comnissioner of Insurance, issued cease-and-desist orders tgainst CARIB and Trans-Pacific. More than 12 other tates also have taken action against one or both of these partities.

Another unlicensed entity selling medical professional lability insurance was targeted by the Commissioner in in emergency cease-and-desist order issued on November 90, 1990. P.R.I.M.E. Co. Ltd., also known as Professional Risk Insurers Management Exclusive Co., Ltd., and Peter Brock, its principal, were named in the

November order. Last known addresses of P.R.I.M.E. and Brock were in Chicago and St. Vincent and the Grenadines in the West Indies. Investigators for the State Board of Insurance determined that P.R.I.M.E. and Brock had sold unauthorized medical malpractice insurance in Texas.

Texas law requires that companies either be licensed by the State Board of Insurance or be listed by the SBI as eligible surplus lines carriers before they may sell insurance in Texas.

Doing business with unauthorized insurers is risky for several reasons. Unauthorized insurers operate outside the law and have not met the financial requirements to qualify as insurance companies in Texas. As unlicensed entities, they do not undergo the annual financial review and periodic examinations which are required of legitimate insurance companies. When they fail, they seldom have any assets that might be used to pay claims. Because they are unilcensed, they are immune from such sanctions as license revocation.

Of particular importance to providers facing malpractice claims, unauthorized insurers are not covered by the state's property and casualty insurance guaranty fund. This means that a health care provider covered by an insolvent unauthorized insurer would be responsible for paying the claim.

Whether an insurer is licensed can be determined by calling the Texas State Board of Insurance's toll-free consumer line, 1-800-252-3439.

Health care providers or others who believe they have been solicited to purchase insurance from an unlicensed carrier, are encouraged to call the Unauthorized Insurance Division at 512/463-6492.

Newsbrief

RICHARD C. HOCHBERGER, D.O., FACOP ELECTED TREASURER OF FORT WORTH PEDIATRICS SOCIETY

Richard C. Hochberger, D.O., FACOP, of Fort Worth, has been recently elected the treasurer of the Fort Worth Pediatrics Society. Dr. Hochberger is a 1975 graduate of the Texas College of Osteopathic Medicine and served his internship at Doctors Hospital in Columbus, Ohio. He also completed a residency in pediatrics at Doctors Hospital in 1978. TOMA extends congratulations to Dr. Hochberger.

Flarch 1991 Texas DO/29

Opportunities Unlimited

PHYSICIANS WANTED

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)

FULL AND PARTTIME PHYSI-CIANS 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)

ASSOCIATE NEEDED — for expanding general practice in East Texas. Guaranteed income with a future. Contact: Steve Rowley, D.O., 903/849-607 or Mr. Olie Clem, 903/561-3771, (08)

IMMEDIATE PRIVATE PRACTICE OPPORTUNITIES — One or more family/general practice physicians. Small rural south central Kansas community. Hospital and L.T.C.J. in community. Obstetrical required. I) guaranteed income; 2) malpractice insurance furnished; 3) clinic fully equipped; 4) modern hospital; 5) housing available. Contact: Administrator, Attica District Hospital, Attica, Kansas 67009; 3167254-7253. (3)

OPHTHALMOLOGIST — urgently needed. Current doctor leaving. Excellent opportunity. Drawing power between 70-80,000 in area. Contact: L.W. Wendlling, Altus, Oklahoma, 405/482-5847. (15)

NEEDED — General/Family Practitioner for Ambulatory/Minor Emergency Clinic located fifteen miles north of Houston. Full-time position at 40 hours/week, no after hours call, Workers Compensation. No HMO, PPO, Medicaid. Salary with paid malpractice. Contact: John Johnstone, D.O. at 713/540-2273. (37)

PHYSICIAN NEEDED — Minor Emergency/Family Practice facility. Full and part time positions. Bilingual. Hobby Airport Area. Contact Dr. Botas at 713/644-3602. (52)

TYLER — DOCTORS MEMORIAL HOSPITAL IS SEEKING — pediatricians; an OB-Gyn physician; an orthopedic surgeon; family practice physicians; and a general internist to work in an association or solo practice. Financial assistance available. Contact Olie E. Clem, C.E.O., 1400 West Southwest Loop 323, Tyler, 75701; 903/561-3771. (45)

MINERAL WELLS — Palo Pinto General Hospital needs urologist. Joint staff hospital (county tax district facility) with 99 beds. 14,000 population community and is located 56 miles west of Fort Worth. Contact: Patricia Parkhill, Palo Pinto General Hospital, 400 Southwest 25th Avenue, Mineral Wells, 76067; 817/325-7891. (47)

ASSUME ESTABLISHED BUSY FAMILY PRACTICE — lease to own or purchase equipment including on-line to Medicaid computer. Four fully furnished rooms, microscope instruments. Beautiful gulf coast area. Doctor leaving for residency. With this practice, hospital-based diet program directorship and maternity clinic medical directorship. Patients in two nursing homes. Contact Donna Becker, D.O. at 512/758-8282. (56)

ABILENE — Primary Care Physicians join with Annashae Corporation in providing patient care to the families of the men and women serving in the Armed Forces. Currently, we are staffing Emergency Room positions in the Abilene area. Competitive Remuneration. Malpractice covered. Licensure Any State. ACLS Required. Contact in Confidence: Annashae Corporation, 230 Alpha Park, Cleveland, Ohio 4143-2202; 1/800/245-2662, EEC/MF. Support the troops, their families and our country, (49)

POSITIONS DESIRED

BOARD CERTIFIED GENERAL SUR-GEON — is looking for practice location. Is board eligible in vascular surgery with experience in thoracic surgery. Availability time, 6 months to one year. Will consider all locations. Write TOMA, "Box 30," 226 Bailey Avenue, Fort Worth, 76107. (30)

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FOR LEASE — Medical office; establisted medical-dental building on Hulen between Vickery and W. Fwy; approx. 1,400 sq. ft. which includes 3-4 exam rooms, lab, business office, private office, and extras. Recently remodeled and ready to move in. 817/338-4444 (27)

FOR RENT — Medical Office in Arlington. Three to six months free rent with proper lease. Ideal for general practitioner. Call 817/265-1551. (32) FOR SALE — 2,100 sq. ft. of building to include 80 x 180 lot as we some equipment. The physician sestablished his practice in this Fort W. office building in 1960 has recently pired. There is a large waiting room, doctor's offices, six treatment rooms, a small laboratory, six orom, x-ray room with developing no Office is ready for occupancy and our office staff is available if you desire C. tact: Robert Gieb, Attorney, 817/336.5 (14)

FOR SALE — Profitable Osteopa General Practice — in the Fort Wor Watauga area. Office fully equip including office manager and LVN. optional. Please call Debbie Stanle 817/284-7380. (22)

MISCELLANEOUS

RECONDITIONED EQUIPME FOR SALE — Examination tables, de trocardiographs, sterilizers, centrity whirlpools, medical laboratory equipme view boxes, weight scales, IV stands much more. 40-70 percent savings. guaranteed. Mediquip-Scientific, Dall 214/630-1660. (29)

WANTED: Used Diathermy Machin Contact Dr. Mohney, 713/626-0312.

FOR SALE — Hunting - Recreating Cabin Site. 40 acre Colorado Wilders sites. Joins San Juan National For Covered with pine forest - good acc cond. Elevation 7,500 ft. Deer, bear, ed One and one-half miles to trout fish lake. 40 minutes to Durango. One band 20 minutes to Teluride Skiing Reser Call Country Dean for information 1817/335-3214 (metro 817/429-0460).

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