LEE COUNTY **MEDICAL**

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THE VOICE OF LEE COUNTY MEDICINE

VOLUME 14, NO. 2

Fort Myers, Florida

April, 1992

IOINT APRIL MEETING WITH SPOUSE/FRIEND

PROGRAM: "SEE, TOUCH, FEEL"

imaginarium:

i/mag/i/nar/i/um (i maj'e ner'e um)

1. Bring an idea into existence and give it an outline, a pattern or shape in the mind; 2. inventive, creative; 3. a place to touch and expand on reality;
4. imagination leads people to think
they see, hear, or feel things that are
not there; 5. a place for all ages to expand their senses and shape their futures; 6. a hands-on museum. How fortunate we are in Lee County

How fortunate we are in Lee County that an opportunity such as this has come our way. You won't want to miss this informative and enlightening presentation. Cost of Dinner for spouses/guests \$18.60. ■

MEDICAL SOCIETY MEETING

Royal Palm Yacht Club

Cocktails 6:30 Dinner 7:00 PM

APRIL 20, 1992

TOPIC: "Imaginarium In Lee County"

DINNER BY RESERVATIONS ONLY

PLEASE

LC.M.S. Members: All reservations must be made by Friday noon before the Meeting on Monday. Cancellations should be no later than noon on Monday. The Society must pay for all reservations made.

Fort Myers VA **Outpatient Clinic**

"An Update in Management of Complications of Hepatic Disease."

Featuring Harold Conn, M.D. Professor Yale University School of Medicine as Guest Speaker.

April 23 & 24, 1992 8 AM - 9:30 AM 3 Category I C.M.E. Credits. To register, RSVP with Teresa Bembenek.

939-3939, Ext: 6310

DON'T FORGET **1992 DUES**

John W. Snead, M.D., Editor PRESIDENT'S



VALERIE C. MOORE, M.D.

The headline in The Wall Street Journal screams, "Medical Science Seeks a Cure for Doctors Suffering From Boorish Bedside Manner". The article was about programs at the University of Southern California and the versity of Southern California and the University of Illinois that use mock patients to test both the competence and compassion of medical students. The article says there is a sense that patients are really dissatisfied with doctors.

An AMA survey claims that only 42% of the public feels that doctors explain things, well, to their patients. Sixty

things well to their patients. Sixty-three percent said doctors were too inthree percent said doctors were too in-terested in making money. Only 31% felt most doctors spend enough time with their patients. A Harris poll indi-cated 42% felt the doctor did not an-swer questions honestly and com-pletely. Thirty-seven percent felt the doctor was not knowledgeable and competent. Thirty percent felt the doctor did not explain problems un-derstandably. Twenty-seven percent felt the doctor did not treat the patient with respect.

There are several ways to respond to

There are several ways to respond to this data. For one thing, except for feeling doctors were too interested in money, more than half of all patients in each of these subject areas felt doctors were doing fine. The data was written up in a negative way, so we get bad press. Who knows how accurate their press. Who knows now accurate their survey was. The article can be dismissed in many ways, but the fact is it was there, and my guess is we will see these statistics over and over.

At the end of the article a medical student was the second of the article a medical student was the second of the article as the second of the article as

student makes the point that a test with mock patients is not going to make a difference in how he behaves as a phy-sician. I agree, but the important point is that medical students realize how important it is how they interact with their patients and how their patients perceive them.

A patient went on to say that, in order to be caring, doctors have to go through being a patient themselves, to feel victimized and to feel helpless. This was the story line of the movie, "The Doctor", when a surgeon finds out what it is like to have cancer. I re-fuse to believe that this is necessary for (Continued on page 2)

"DR. JOHN" CARS

Why would a guy with a Buick station wagon want to write about cars, you might ask. I certainly would. But cars are like toilet paper; regardless of the brand you choose, to be without would lower your standard of living two notches.

I am certainly not "the first by whom the new is tried". My kids were in high school when they begged me to get an AM-FM radio. I was almost totally ignorant of FM radio, which is hard to believe, but true. I also thought cruise control was dangerous, got one by ac-

control was dangerous, got one by ac-cident, and now can't go across town without it. So, I am able to learn. After that, I bought a car with a tape player, which I thought was okay but not the turning point of my life. This car was four years old when Alice asked me how to use the tape player. This was a novelty in two ways: one, Alice rarely asks meanything, and two, any machinery with more than an off-on switch is of no interest to Alice. Having mastered the tape player, her car is now awash in tapes, mostly out of car is now awash in tapes, mostly out of their cases. Lord, I created a monster. Alice likes Christmas carols (year 'round), Strauss waltzes and Sousa marches. Her tapes are seldom stolen. This series of acquisitions peaked at the power-everything car, which came about in a surprising manner. This may

not be new information for you, but it was a revelation to me.

In Alice's sub-culture, I learned, the pecking order is determined at the drive-in window of the bank. Alice described the scenario: you drive up to the window and are waiting for your transaction. An acquaintance drives in the next lane, recognizes you and mo-tions for you to roll down the passentions for you to roll down the passen-ger - side window. If you have to crawl over your packages and crank down the window, wrinkling your dress and losing your glasses, only to watch the other person press a button for her window, it is very clear who is the pecker and who is the peckee. So, we got a car with pushbuttons. This leads to the present time. I, who had always thought of a car as just a

had always thought of a car as just a means of transportation, have developed a crush on a van, a van I can envi-sion carrying me, my sons and our model planes to every contest in North America, and in comfort beyond imag-

How to get this van without Alice learning it costs more than my net annual income, is the problem.

We have what's called an open relationship: I sometimes tell her some-

(Continued on page 2)

VOLUNTEER PHYSICIAN LIABILITY By: Jeffrey L. Cohen, Esq. Associate General Counsel

The FMA, in partnership with component county medical societies, has embarked upon an energetic campaign to promote and highlight physician volunteerism. At its June 8, 1992 meeting, the FMA Board of Governors in fact approved a plan of action on physician volunteerism. Nevertheless, some physician's are uncomfortable volunteering their services to economically disadvantaged people unless they receive the same grant of liability immunity their county public health unit physician counterparts re-

ceive.

The law is presently ambiguous on the issue of liability immunity for physicians who volunteer to treat recipients of state aid. As such, it is impossible to say with certainty that physician volunteers are immune from suit, even though the FMA, the Department of Insurance, and the Department of Health and Rehabilitative Services believe present liability immunity statutes are intended to apply to physician volunteer. These are no particular volunteers. cian volunteers. There are, nonetheless, a number of options for physi-(Continued on page 2)

WORKMAN'S COMPENSATION: LETS FIND WHERE THE MONEY GOES

MONEY GOES

I get a little tired of hearing how much the "medical" costs of Workman's Compensation (WC) have skyrocketed. Until our practice stopped participating in this program, we saw only write downs against our standard charges to levels approximating those paid by Medicaid or refusal to reimburse for standard investigative procedures. There was no doubt in my mind that if "medical costs" were truly increasing, the result wasn't coming our way as in reality our reimbursement had declined dramatically.

Prior to getting rid of our last WC case however, I was deposed by two attorneys who brought along a court reporter (who I have since heard requires payment in advance from these folks). I was informed that there was a maximum fee which I could charge these guys for my deposition if it took one hour or five. As the session progressed, it was apparent that they had been making the rounds deposing many physicians and chiropractors for (Continued on page 2)

(Continued on page 2)

PR — YOU CAN'T BUY

"I'd like to thank each one of you who participated in the recent 8th Annual Video Health Fair, March 25, 1992 demonstrating that you care enough to be involved enhances the image of medicine in ways we may never fully appreciate."

LEE COUNTY MEDICAL SOCIETY BULLETIN

3805 Fowler Street Fort Myers, Florida 33901 Phone (813)936-1645

The Lee County Medical Society Bulletin is published monthly with the June and August editions omitted.

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The Editor welcomes contributions from the members. Opinions expressed in the Bulletin are those of the individual authors and do not necessarily reflect policies of the Society.

PRESIDENT'S MESSAGE (continued from page 1)

most physicians. We cannot all get ill in order to be better physicians, so there

If this is the situation, one thing that has occurred to me is that we could learn alot from retired physicians. Their years of experience give them a special perspective. I feel that retired special perspective. I feel that retired physicians have so much to contribute in so many ways; teaching institutions particularly ought to include them in these new programs of "teaching compassion". Maybe they ought to include retired physicians on the admission committees, so the people admitted to medical school would be less likely to be the true of perspective. likely to be the type of person who needs to be "taught compassion". If nothing else, maybe retired physicans can teach us how to get less bad press!

CARS

(continued from page 1)

thing about my life, she occasionally mentions something about hers. Perhaps I can just let the van slip through. "The what? Oh, yes, the new car. What's for dinner? Is it time for the news?"

That might work, but I would still be faced with her firm refusal to drive a

"It's not cool to drive a van," she told me in her this conversation is over

I don't understand this at all. It has an air-conditioner — that's cool. It has a tape player, power seat and push button everything. She could flat-out stomp those ladies at the drive-in window. I haven't figured out how to work that into the conversation, but if I can, watch for me in the preking last. watch for me in the parking lot! III John R. Agnew, M.D.

QUOTE FOR THE DAY

National Health Insurance

Has the compassion of the IRS The efficiency of the Postal

The prices of the Pentagon

MARCH GENERAL MEETING



Frank M. Bryan, M.D. (right) was honored by the Florida Medical Association with a certificate for 35 years of membership. Dr. Bryan is pictured with our guest speaker, Joseph C. Von Thron, M. D. and his wife, Jane. Also, receiving a certificate for 35 years of membership is Leland K.

The Members approved a resolution on nominations and elections of District Representative to the FMA Board of Governors to be discussed at the FMA Annual Meeting in May. Annual Meeting dates are May 27-30, 1992 at the Orlando World Marriott. All members are invited to attend.

VOLUNTEER PHYSICIAN (continued from page 1)

cians to consider in assessing their comfort level on the issue.

Existing liability insurance. It is possible in most cases to have liability coverage extended to volunteer situations. We advise physician volunteers to contact their insurance carriers and receive written assurance that their contemplated volunteer services will be covered by existing liability insurance. Some physicians may of course find this alternative unacceptable given the often high coinsurance requirements.

NonProfit Medical Clinics. Physicians volunteering their services in nonprofit medical clinics may be afforded liability immunity under the Good Samaritan Statute. Section 768.13(2) (c) states:

tute. Section 768.13(2) (c) states:

Any person who is licensed to practice medicine, while acting as a staff member or with professional clinical privileges at a non-profit medical facility, other than a hospital licensed under Chapter 395, or while performing health screening services, shall not be held liable for any civil damages as a result of care or treatment provided gratuitously in such capacity as a result of any act or failure to act in such capacity in providing or arranging further medical treatment, if such person acts as a reasonable prudent person licensed to practice medicine would have acted under the same or similar circumstances.

providing of arranging further medical treatment, it such person acts as a reasonable prudent person licensed to practice medicine would have acted under the same or similar circumstances.

Of course, the optimal solution to present statutory ambiguity is to ensure that physicians volunteering to treat the poor are afforded precisely the same liability immunity afforded to state employed physicians. At the time this article was written, the FMA, the Department of Health and Rehabilitative Service, and others are strongly advocating House Bill 529, sponsored by Representative Albright, and its companion, Senate Bill 272, sponsored by Senator Gardner.

Given the uncertainty of the legislative process and time it takes for bills to become law, the FMA and Department of HRS recognize the need for an alternative solution, and have therefore begun working on a model contract which is intended to support the argument that a protected legal relationship exists between volunteer physicians and governmental entities such as HRS. Efforts are expected to be finalized, if necessary, after the legislative session.

The FMA has taken the lead in partnering with other participants in the health care industry, such as HRS, the Florida Hospital Association, and Florida Nurses Association in rendering voluntary care to Florida's needy. We recognize that the issue of liability is a prominent concern among many volunteer physicians, and therefore welcome further discussion on the issue.

WORKMANS COMPENSATION (continued from page 1)

workmans compressation (continued non page 1)
this "injured worker". I began to wonder if my participation in this charade was considered a "medical" cost.

As originally conceived, the idea of providing a safety net for injured workers was a reasonable idea. Over the years, the private insurers that run the program began to push up the price dramatically, to the point that many in the construction industry cannot afford to pay the demanded premiums yet stay in business. From the politicians we hear that the reason for these unreasonable costs are the medical outlays on behalf of the victims.

cians we hear that the reason for these unreasonable costs are the medical outlays on behalf of the victims.

These victims tell a different story. They recount being denied access to service, rejection of legitimate claims, and arbitrary withdrawal of benefits. Even worse, many truly injured but recovered individuals have been rejected for further employment because of their history of having made a legitimate claim. The insurance carriers have been felt to be responsible for many of these problems.

Certainly, our experience with the carriers was never pleasant nor uncomplicated. Our staff continually stated that these companies were rude and demanding. The paper work demanded time from both office staff and physician far in excess of normal. When we stopped accepting these patients (it's all or nothing under state law), the abuse from the first few callers was monumental; all were employees of the carriers.

carriers.

Returning to the economics of the plan, we estimated that we spent over one dollar in expenses for every dollar returned by WC. Much of this was consumed in paper work, telephone calls, appointment scheduling, letters and the ultimate waste of time, the deposition. When we examined the fee schedule published by WC, it was apparent that we would be better off looking after kids on Medicaid. At least then if we lost money, we would have the satisfaction of supporting those in need, not the WC attorneys. not the WC attorneys.

If the doctors aren't getting all of these increases, where is the money going for medical costs? Surely our politicians wouldn't lie to the public. Maybe the accounting is wrong. Maybe "medical costs" include a lot of things over which we have no

control.

The FMA needs to ask what constitutes medical cost under the current accounting system. I personally would like to see a breakdown into some broad categories like chiropractor fees, drug costs, physiotherapy costs, medical supplies, hospital costs, and physicians fees. Cost of letters and depositions need to be placed under legal or administrative costs, not physicians fees. My bet is that the increase in physician cost will be far less than for the other categories. Toss in the attorneys and the carriers' administrative fees for comparison and I bet we will look real frugal. John D. Donaldson

THE **QUESTION** MAN

OPINIONS - EDITORIALS LETTERS TO THE EDITOR

John W. Snead, M.D.

"SHOULD THE FDA HAVE **BANNED SILICONE BREAST** IMPLANTS?"



"No. As the inci-dence of side ef-fects from the Sili-cone implants are not that common, the patient and the physician should have the freedom to

choose this form of treatment with adequate informed consent. Ranjit Fernando, M.D.,

Rheumatology



"There is no scientific data to support what they did. This has significant ramifications medically. If they caused autoimmune disease. you would have to ban all silicone implants."

John S. Bruno, M.D., Plastic Surgeon



"No. It will probably end up like IUD s. There is probably nothing wrong with the product, but it wound up being forced off the mar-

David H. Brown, M.D., OB/GYN



"I belive Dr. Kessler's decision was premature and not based on scientific data. The "new in-formation" about implants that prompted the moratorium

still has not been presented to the public. No implantable device is perfect. Certainly Dr. Kessler's decision has opened the door for class action suit."

Joseph Mazza, M.D., Plastic Surgeon



"No. If women are given informed consent they should be able to do what they

Patricia S. Miller, M.D. Pediatrician

NEXT MONTH'S QUESTION "Where do you think Health Care Reforms should begin?"

Send your comments to the Medical Society.

Bulletin deadline is the 15th of each month . . . we want to see you in the print media!

WHAT'S NEW?

Current News & Happenings At Area Hospitals

CAPE CORAL HOSPITAL

CAPE CORAL HOSPITAL

Cape Coral Hospital's new 30 thousand square foot, 4.6 million dollar ICU expansion, was completed February 26. The project on the third and fourth floors opened up ten beds for the Cardiac Intensive Care Unit, doubling the hospital's capacity to care for the critically ill. The 12-bed unit already existing will concentrate resources on other medical and surgical emergencies and trauma. The ICU expansion is only a small part of the changes taking place at Cape Coral Hospital. Visitors these days come in through a new main entrance to find the main lobby much transformed, the result of preparations to construct a new North Tower that will add 107 new beds to the hospital's current 174 beds. Construction of the North Tower itself is expected to begin by early April. Renovation and expansion of the Recovery Room and an addition to the Delivery Room were completed in late January. ■

GULF COAST HOSPITAL

GUIF COAST HOSPITAL

Gulf Coast Hospital recently renovated its Emergency and Outpatient admitting area, making patient registration quicker and more efficient. The improvments including constructing two Emergency/Outpatient Registration areas, in addition to the existing area. Emergency and outpatients can now register more easily and quickly, saving valuable time. In addition, a new Triage Area, separate from the Emergency Room, is now available. In this area, a Triage Nurse will immediately evaluate emergency patients to determine the severity of the patient's injury or illness.

LEE MEMORIAL HOSPITAL

Blood donors are some of Lee County's real hometown heros and the public is invited to join in a special Blood Drive using Lee Memorial's new Bloodmobile! A special dedication ceremony of the bloodmobile will kick off the blood drive. It all happened Friday, March 20, at 9:00 a.m. at Health Park Medical Center, Entrance "A". For those who donate on Friday, the Barbara B. Mann Performing Arts Center is offering two tickets for the price of one to the April 13 "Memories of Big Bands and Broadway" show featuring Hal Linden. The Lee Memorial Hospital Blood Center recently received its beautiful new bloodmobile thanks to donations from the community and the LMH Auxiliary. It replaces the 22 year veteran bloodmobile which had served Lee Memorial since 1982 (it was a 1970 model). Costly repairs and unreliability promoted LMH supporters to purchase the new vehicle.

LEE MEMORIAL HOSPITAL INTRODUCES PHYSICIAN LIAISON
Physicians now have another avenue to help coordinate their needs while at Lee

Physicians now have another avenue to help coordinate their needs while at Lee Memorial. Martha Smith was recently appointed to serve as the physician liaison to help problem solve, coordinate physician communications and serve as the liaison for hospital services. Martha is also the Director of LMH's Neuroscience Services.

for hospital services. Martha is also the Director of LMH's Neuroscience Services. Physicians with concerns or questions may call Martha at 332-6482, Beeper 1165.

The April 1992 CME Programs

Every Thursday 12:30 p.m. -1:30 p.m. at Lee Memorial Hospital Auditorium. 1 credit hour in Category I of the Physician's Recognition Award of the American Medical Association. Call 334-5959 to register.

April 2: "Management of the Renal Transplant Patient and Immunobiology Drugs on the Horizon", Joel Van Sickler, M.D.; April 9: "Alpha-1-Antitripsia Deliciency: Update on Diagnosis and Treatment Bruce Mehlman, M.D.; April 16: "Diabetic Foot Care" David Gavin, D.P.M.; April 23: "Surfactant Replacement Therapy in Respiratory Distress Syndrome of the Newborn", William Liu, M.D.; April 30: "ACLS Update" Joseph Lemmons, D.O.

DISNEY DISCOUNT CARD

The Disney World and Disneyland Discount Card is now available through the Walt Disney Magic Kingdom Club, offered by the Lee County Medical Society. If you would like to receive the discount card, you may do so by contacting our office,

PICTORIAL DIRECTORY

PBS studio will be at the April General Membership meeting to take your picture PBS studio will be at the April General Membership meeting to take your picture for the next Pictorial Directory. Please stop and have your picture made before coming upstairs for the meeting. Please dress accordingly. You will be financially responsible to PBS Studio in the amount of \$21.20 for one picture for the Directory. If you want to make an appointment at the Studio, call Linda at 936-8600. Address: 3817 Kelly Street, across from K-Mart, US 41. We need a wallet size (2½"×2½") photo in black & white. You may choose the one you had in the last directory. ■

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AUXILLARY NEWS

March was a busy month for members of the Auxillary. Beverly Goethe and Barbara Siegel spearheaded our latest charitable event for the homeless of Lee County. With our "Medi-bag" project, we donated 300 bags filled with First Aide and personal hygiene products to county Salvation Army shelters. Our co-chairwomen collected donations from local establishments (hospitals, pharmacies, food stores, physicians offices, etc.) as well as from our general membership. Together with their team of Auxillians, the bags were filled and delivered to those in need.

need.
On March 15 five of our Auxillians attended the FMA Auxillary SW District Confluence in Osprey, FL. The topics discussed were: "How to Get What You Want From Your Legislator", and, "When the Going Gets Tough . . . The Tough Get Marketing". Liz Kagan presented an informative program on constructive ways to lobby along with Julie Malone, Executive Director of the FMA Auxillary. Andrea Eliseu, President of Medical Marketing, Inc., delivered a very interesting presentation on marketing a medical practice. Lynn Gorovoy, Bev Goethe, Debi Penuel, Cheri DePree and Betty Rubenstein were thoroughly impressed!
Our annual Doctors Day Picnic was held at Lakes Park on March 22. This enjoyable event was planned by Sara Krivisky, Renee Lane and Felinda Rubin. Rib Cycatered this event and Sports Resorts organized the entertainment for both

catered this event and Sports Resorts organized the entertainment for both

catered this event and sports Resorts organized the Chemistran Confiders and adults.

The Video Health Fair was held on March 25. Auxillary members were busy assisting the Physicians in their efforts to provide free medical advice to the public. Barbara Raymond organized the Auxillians and made sure the day ran smoothly. Auxillians also distributed AIDS pamphlets to the High School students of Cypress Lake High School.

Respectfully submitted by Betty Rubenstein, Corresponding Secretary of the LCMSA



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OSHA BLOODBORNE PATHOGEN RULE

Physician offices had until March 6, 1992, to comply with OSHA's Occupational Physician offices had until March 6, 1992, to comply with OSHA's Occupational Exposure to Bloodborne Pathogens Rule. The rule is aimed at minimizing the risk of exposure to hepatitis B, HIV, and other bloodborne pathogens in the workplace. The crux of the rule is compiling a written "Ex posure Control Plan" which must be accessible to employees and updated annually and when job classifications or procedures change. By rule, the Plan must be completed by May 5, 1992. The rule also requires "engineering and work practice controls" such as the use of sharps containers, selfsheathing needles, and special plastic bags which most physicians present have in contraining blobay and use waters. The regulations will great plate a such as the property of the property ently use in containing biohazardous wastes. The regulations will go into full effect by July 6, 1992, when OSHA inspections are specified.

A description of the rule by the U.S. Department of Labor may be obtained from the FMA's Legal Department. Copies of the rule may be obtained through:

OSHA Office of Publications

U.S. Department of Labor

Room N 3101 200 Constitution Avenue, N.W.

Washington, D.C. 20210
Telephone: (202) 523-9667
Additionally, the AMA has put together a traning program kit which includes a 25minute videotape, an administrator's guide, a model exposure control plan and training manual. The kit is available to AMA members for \$150.00 and further information may be obtained by calling AMA customer service at 1-800-933-4268.

MEDICAL LEGAL CODE UPDATE

"We need your ideas & comments."

In the last two or three years the legislature has changed many statutes which directly effect our Medical-Legal Code. A tentative decision has been made to put off revising the Code until the 1992 session adjourns.

Any physician having ideas or comments about the Code should put them in writing and send to the Medical Chairman with a copy to the Legal Chairman:

Medical Chairman Wallace M. Graves, Jr., M.D. 70 Danley Drive Fort Myers, FL 33907

Legal Chairman T. Rankin Terry, Jr. 2115 Main Street Fort Myers, FL 33901

PHYSICIANS IN THE NEWS

Paul L. Yudelman, M.D. and Mark S. O'Konski, M.D. have successfully completed the American Board of Gastroenterology. They are in practice with Drs. Penuel

Associates in Architecture

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LEE COUNTY MEDICAL SOCIETY

MEDICAL SOCIETY MEETING Royal Palm Yacht Club Cocktails 6:30 PM Dinner 7:00 PM APRIL 20, 1992 TOPIC: "Imaginarium In Lee County" DINNER BY RESERVATIONS ONLY PLEASE!!!

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