



Mary C. Blue, M.D., Editor

JOINT SOCIETY SPOUSE/FRIEND GENERAL MEETING FOR MARCH

Speaker: Joseph Von Thron, M.D.
Chairman,

FMA Delegation to AMA Meetings
Dr. Von Thron is a nationally known orator and spokesperson for medicine. In the past he has personally changed the direction of the AMA and knows that one voice can make a difference.

If you think that the AMA and organized medicine does not represent you — come and make your voice heard and hear what he has to say. He will speak to us about the AMA, FMA, local society and the process through which we determine how our profession evolves.

Dr. Von Thron is a native of Orlando, Florida. He and his wife, Jane reside in Cocoa Beach where he is a Family Physician. He is Past President of Brevard County Medical Society, Florida Medical Association, Florida Academy of Family Practice, FLAMPAC and Chairman of the Florida Delegation to the AMA since 1986.

He is a very dynamic speaker and you will not want to miss hearing him. Dinner for spouses and guests - \$18.60. ■

MEDICAL SOCIETY MEETING

Royal Palm
Yacht Club

Cocktails 6:30
Dinner 7:00 PM
MARCH 16, 1992

SPEAKER:

Joseph Von Thron, M.D.
Ch., FMA Delegation to
AMA

TOPIC:

"What Has The AMA &
FMA Done For Me?"

DINNER BY
RESERVATIONS ONLY

PLEASE

L.C.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.

**DON'T FORGET
1992 DUES**

PRESIDENT'S MESSAGE



VALERIE C. MOORE, M.D.

PUBLIC RELATIONS

Since the day I opened my practice patients have been telling me about how terrible other physicians are. We have all heard those stories, some of them outrageous, some of them laughable, and some of them sadly true. I have always thought about collecting the stories of patients about their medical care. Some of the stories are entertaining in their absurdity. One angry patient felt her physician did not care about her as she saw him yawn. It did not matter to her that he had been up most of the night on call. His human tiredness was not to be allowed in her physician, although the quality of the care was never in question.

We have all heard the tale that people do not trust physicians in general, but have confidence in their own physician. It is good that a patient has enough trust in you to confide about their problems with another physician. On the other hand, the next day it may be you that they feel has failed them and you may be the object of another sad story.

My patients tell me about physicians that treat them like children. They tell me that there are physicians that will not answer their questions. They tell me that physicians do not listen to them nor take their problems seriously. When this happens, my first reaction is that I would never treat a patient that way. Who knows though, who I have offended or misunderstood? Complete communication is difficult enough with your peers, but how do I do with the non-English speaking, the elderly and the teenager?

The point is that on any day, any of us could be open to criticism from our patients, not for the medical care we give, but for the way we deliver it. We cannot be perfect all the time, but somehow the public needs to know we really do care about them.

The AMA has started a national campaign of advertisements to project the caring image that we would all like to have. Unfortunately, I think it will take more than that to convince patients

(Continued on page 2)

"DR. JOHN" DOUBLE STANDARD

In the last year I wrote a story about the funniest episode of my career. It ended with a beautiful young woman saying, "You have to f...k, huh?" The blank spaces came from my editor, who said she just wasn't up to that, although she agreed it was a good story. My editor is a very likable lady, so I took this graciously. It's what I had expected anyway.

Not long after that, the Judge Thomas - Anita Hill affair was on TV every day, all day, including Saturday cartoon time. They discussed a porn film star called L...g D...g S...r, having s...x with a...s, and the size of the Judge's p...s. Only this time, there were no blanks. Each Senator in turn asked Anita if she had s...x with a...s. You would think the Senators could remember her earlier answers — I certainly did.

Senator Kennedy wisely refrained from saying much, but he appeared to be getting some good ideas.

My TV set had barely cooled off when the Willie Smith rape trial set up shop. Again, all day every day.

We viewed her underwear, and listened to arguments about how the items came to be off her personal body. They discussed whether Willie's p...s was e...t, and whether he e...d, and whether she was a...d, and whether she liked all this or not.

We learned Willie was a s...x m...e because he could do "..." twice in one night, according to the prosecutor's standards. This led to speculation about the prosecutor's husband, who apparently is not L...g D...g S...r. But then, who is?

I didn't watch enough of this to know if he was guilty of rape, although I could have convicted him of stupidity, with a sentence of 200 hours in the medical library and a paper on s...y transmitted diseases, including pregnancy (can I write pregnancy? Oh, thanks).

Senator Kennedy didn't say much, again, and I doubt he got any truly new ideas.

Lord knows what's next on the TV — perhaps condoms ads, with endorsements by L...g D...g S...r. Whatever it is, don't send the script to my editor for approval. They might find it difficult to pronounce "..."

John R. Agnew, M.D.

The trouble with being Dr. J...n's editor is, d...ned if you do, d...ned if you don't. This publication can always use a little h...mor, so this time we d...d. ■

Editors Note

SUPREME COURT RULES ON NICA

On February 13, 1992, the Florida Supreme Court ruled against the FMA's challenge to the NICA Assessment. The four justices writing for the majority quoted extensively from the underlying case, finding that, while the \$250.00 assessment constituted a "tax," it bore a "reasonable relationship" to the NICA Plan's stated purposes, and is therefore constitutional. Quoting from the transcript of the final hearing, the majority wrote:

"Since one of the goals of the Plan is to help alleviate the (professional liability) crisis and permit the efficient delivery of health care services by all members of the team, Plaintiffs are undeniably related to at least one of the goals of the Plan and stand to benefit from its realization. . . . Thus, the Legislature's decision to require Plaintiffs to contribute to the Plan was not wholly unreasonable, arbitrary, or capricious.

We are convinced that all physicians, regardless of whether they practice obstetrics, derive a benefit from this legislation that is greater in degree than that derived by the general public. While the benefits accruing to non-obstetrical physicians are obviously

(Continued on page 2)

WHAT'S GOOD FOR THE GOOSE. . .

RBRVS is upon us and we have had to learn a new set of rules including the one that says bureaucrats can afford to sit and nibble us to death. As of the first of February the fee schedule for my services (and all other medical consultants from whom the government purchases service) establishes that my time is worth one hundred dollars per hour providing I pay my own expenses. It becomes apparent that application of this new rule to the rest of government ought to balance all budgets in the next fiscal year.

As you are aware, RBRVS stands for Resource Based Relative Value System and much of it is derived from the "research" of the medical administrative refugees from the Peoples Republic of Taxachusetts now resident in the suburbs of Washington. They are led by Doctor Gail, PhD, the bureaucrats' own version of Dr. Ruth. With complete disregard of the country's elected officials, this crowd has managed to introduce these "reforms" which are likely to have the effect of making seniors second class citizens in the country they built.

(Continued on page 2)

PICTORIAL DIRECTORY

PBS studio will be at the March & 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 (2 1/4" x 2 1/4") photo in black & white. You may choose the one you had in the last directory. ■

LEE COUNTY
MEDICAL SOCIETY
BULLETIN3805 Fowler Street
Fort Myers, Florida 33901
Phone (813)936-1645

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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)

that we have a caring profession. I think it will take more than a yearly video fair and some volunteer projects. It will take the concerted effort of every physician on every day to convince the public that we really are the good guys.

You might ask why does it matter what people think of physicians, other than self satisfaction. It matters because the future of medical care is going to be decided by the voters in the near future. If patients cannot trust us and know us as the caring people we are, they will not listen to us. If they do not think we care about them, they certainly will not care about our uncertain future and that of medicine. ■

Supreme Court
(continued from page 1)

less than those obtained by obstetricians, the Legislature recognized this by assessing them only \$250.00 as compared to \$5,000.00."

The illogic of this split decision was illustrated clearly by the three dissenting judges. Calling the assessment a "status tax" (one based on a person's position in life or membership in a particular group), Justices Kogan, Shaw and Barkett argued:

This is a little different from taxing only school teachers to pay for new educational facilities, or taxing only licensed psychologists to pay for public mental health care, or taxing only policemen to pay for victims' compensation programs. One step further along this doubtful train of logic would lead to the conclusion that society can shift its more onerous tax burdens exclusively onto those minorities or groups that lack a sufficient voice in the state capitol. . . The guarantees of the Declaration of Rights clearly will not tolerate the gross inequity apparent in the present case.

Discussions are taking place to consider our options. ■

FEBRUARY GENERAL MEETING

New Members To The LCMS:

Dale L. Haggman, D. O., Cardiology; William R. Keith, Gastroenterology; Joel I. Lans, M.D., Gastroenterology; Michael J. McCleod, D. O., Hematology-Oncology; Donald Pollock, M. D., Psychiatry; Paul A. Raskauskas, M. D., Retina Vitreous; Rajan Sareen, M. D., Internal Medicine; Marc C. Schneider, M. D., Plastic Surgeon; David M. Shapiro, M. D., Anesthesiology

Status Change To Active:

David H. Brown, M. D.; Robert A. Brown, M. D.; John A. Distasio, M. D.; E. Trevor Elmquist, D. O.; Abusayeed M. Feroz, M. D.; Ronald D. Gardner, M. D.; Dana G. Killam, M. D.; Anthony Mathew, M. D.; Steven Priest, M. D.; Joel Van Sickler, M. D.

ANNOUNCEMENTS:

FMA Activities Re: RBRVS

Your input into the process to change the RBRVS as it relates to your practice is crucial. Please send your comments to Mr. Stephen Keene, FMA, P.O. Box 2411, Jacksonville, FL 32203. Your opinions and comments will become part of an informational network to identify RBRVS problems.

Register To Vote

The Medical Society with the help of the Lee County Voter Registration Office signed up 12 members and spouses to vote at the February Meeting. Cindy at the Medical Society can sign you up if you give her a call.

Large Membership Turnout

Our speaker was Rep. Porter Goss on what is happening in Washington regarding the health care industry. We had 150 members and guests attend. ■

FEBRUARY MINI INTERNSHIP PROGRAM



1st Row: Lalai Hamric, CEO, Family Health Centers; Carolyn Rey, Legislative Assistant, Rep. Goss; Maryln Zahler, Adm., Independence Court; Susan Mauro, Director, Human Resources at Shell Point.

2nd Row: Peter M. Sidell, M.D.; Thomas E. Teufel, M.D.; Mark S. Gorovoy, M.D.; David R. Butcher, M.D. and Program Coordinator, Phillip E. Andrews, M.D. ■



Carolyn Rey, Legislative Assistant for U.S. Rep. Porter Goss discusses with Dr. Peter Sidell their schedule the day she will follow him as an intern. Ms. Rey is working with Rep. Goss on health care issues and has considered a career as a physician. ■

What's Good For The Goose. . .
(continued from page 1)

At this point we may as well concede that we are going to be stuck with this system and the nibbling will continue. These civil servants will sit there and wait us out with most of them drawing salaries well equivalent to "medical consultants" reimbursement. Only a few specialties can afford to abandon Medicare patients entirely. What we need is to have the playing field leveled as the expression of the decade goes and introduce GCBBS, Government Consultants Budget Balancing System.

We need to propose these same rules be applied to all government

consultants or contract employees, prorated of course for education and experience. By this criteria, as my personal level, determined by my fourteen years of post-high school education, my fifteen years of experience and my rate of expenses, has been assigned a value of one hundred, an attorney with seven years post-high school, five years experience and low malpractice fees should therefore be limited to a level of forty-five. Time for a paralegal naturally would be less and the consultants would be expected to provide their own expenses from this rate as we do.

We need to institute another couple of factors in this new relative values system. The amount of judgement necessary and the responsibility can be esti-

OPINIONS - EDITORIALS
LETTERS TO THE EDITOR

John W. Snead, M.D.

"IS IT UNETHICAL FOR A DOCTOR TO REFER A PATIENT TO A FACILITY IN WHICH HE/SHE HAS A FINANCIAL INTEREST?"

"It is not unethical to refer a patient to a facility in which I may have a financial interest if the procedure is medically indicated and the charge is competitive."



Austin A. Ardema, M.D.,
Family Practice

"From an absolute viewpoint, the doctor's motivation determines whether a referral is ethical. In the final analysis, we have a financial interest in nearly everything we do, fortunately most of us try our hardest to do right by our patients."



Jerry S. Kantor, M.D.,
Psychiatry

"By and large it is not unethical. It is the appearances that are the problem, especially for the patients. I don't see any abuses occurring in our community here."



John W. Klingerman, M.D.,
Urology

"It is not unethical as long as the patient is fully aware. The doctor must be careful not to intimidate



Edwardo Williams, M.D.,
Family Practice

the patient. If doctors cannot do this, then we should assist others in setting up guidelines that will be acceptable to all."

NEXT MONTH'S QUESTION
"Should the FDA have banned silicone breast implants?"

Send your comments to the Medical Society.

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

mated as has been done for our surgical procedures. A value to society factor can be added. Negative values could be generated under my scoring system. You can provide our own examples for this category.

We could get good old Dr. Gail, now working for a mere fifty bucks an hour and paying her own expenses, to institute this system. She could have a field day determining behavioral offsets for professions whose behavior has been suspect in the best of times. This time however we will dispense with the niceties of telling the profession that these measures will be budget neutral. Now we will state that the purpose will be deficit zero and balance the budget first year of GCBBS. ■

John D. Donaldson, M.D.

WHAT'S NEW?

Current News & Happenings At Area Hospitals

CAPE CORAL HOSPITAL

Cape Coral Hospital's new comprehensive Cardiopulmonary Rehabilitation program is scheduled to be fully operational this month.

The goal of this multidisciplinary program is to help improve the quality of life through education and personalized exercise. This can help alleviate symptoms and decrease the frequency of hospital admissions. A candidate for the program must be referred by a physician, and the prescription for the program is based on the results of a series of tests and evaluations. ■

CME at Cape

3/11/92 - "Carpal Tunnel Syndrome" Speakers: Drs. John Hugill and Harris Bonenette, CCH VIP Dining Room 12:00 noon #920031; 3/25/92 - "Acute and Chronic Hepatitis" Speaker: Alexandra Gibas, M.D., CCH VIP Dining Room, 6:00 p.m. #92-0079. ■

GULF COAST HOSPITAL

Expands Cardiopulmonary Services

Cardiopulmonary Services recently added four new services: Stress Echocardiograms, Biplane Transesophageal Echocardiograms, Upper Pulse Volume Recording with Segmental Pressures and Lower Pulse Volume Recording with Segmental Pressures.

The Stress Echos utilize the latest technology from Nova Microsonics. Using the Prevue III system, images are captured from the HP Sonus 1000 Echo System. These images are fed to our new ImageVue System for complete analysis and report generation. All equipment is identical to the system used at the Heart Institute.

The Biplane Transesophageal Echo program utilizes Hewlett Packard's technology providing the best ultrasonic view of the heart. Tests are performed by the Gulf Coast staff on an inpatient and outpatient basis. Please call 768-8520 to schedule testing. ■

LEE MEMORIAL HOSPITAL

LMH Directives Brochure Offered

Lee Memorial's Legal Services Department has prepared a free brochure, "Deciding About Your Medical Treatment" to help patients make knowledgeable choices regarding advance directives, their choices for future health care if they become incapacitated and unable to communicate. The brochures are given to patients as they are admitted and are also available through LMH's Marketing Communications Department. For more information call Marketing-Communications, 336-6770. ■

The March 1992 CME Programs

Every Thursday 12:30 p.m. - 1:30 p.m. at Lee Memorial Hospital Auditorium. Credit is 1 credit hour in Category I. Call 334-5959 to register.

March 5: "Dental Implants" Timothy Hogan, DDS; March 12: "Ocular Manifestations of Systemic Diseases, Especially AIDS" Trevor Elmquist, D.O.; March 19: "Acute Care of the Multi-Trauma Patient" Dominick Artuso, M.D.; March 26: "Joint Cancer Conference" Michael Katlin, M.D. ■

SOUTHWEST FLORIDA REGIONAL MEDICAL CENTER

Construction is now underway on the future home of a new Signa Advantage MRI.

The fixed-site MRI, according to Stuart Bobman, M.D., radiologist, will have a remote, independent console in the Radiology Department, allowing the radiologists to watch the test as it progresses. "MRI is the primary imaging modality for the brain, spine and joints," explained Dr. Bobman. "There is a higher intrinsic contrast between the different soft tissues than with any other imaging modality." The system stores 6,000 images on a single optical disk, the size of a music CD.

The Signa Advantage is the most advanced system in the country, and is the first of its kind in Lee County. The advantages to physicians and patients will be less time spent during tests and superior imaging. The new MRI is scheduled to be operational by the end of April. ■

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:

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

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

Letters of Interest

January 30, 1992

Health Care Finance Administration
P.O. Box 26676
Baltimore, MD 21207

RE: New Levels of Medical Care or EMS

Dear Sirs:

I am diligently attempting to deal with the new system of billing which you have come out with. Since I am a surgeon, a good deal of my practice is going to go through the code numbers for surgery, but I do have a reasonable office practice and I am having a little trouble dealing with the concepts.

In the face-to-face encounter with the patient, as it deals with the diagnostic and management segments, I need to know a little bit more about how to do that. For example, I need to know whether the "face-to-face" is to be head-to-head, nose-to-nose or chin-to-chin. Certainly, it will not be mouth-to-mouth. I also need to know something of the depth of the furrows in the brow on my part. In other words, as I deepen the furrows in thought, am I allowed to charge more. The level of concern that I need to express will certainly affect my clinical decision, and that could easily result in some gastrointestinal reaction. I am wondering if I can make any additional charges for the amount of bowel sounds that are evoked.

I am also wondering if we might not more clearly define the encounters as "back-to-back" or "belly-to-belly". The orthopedic examinations could, of course, include the back-to-back and hip-to-hip as well as knee-to-knee and, perhaps, even toe-to-toe. The belly-to-belly would be more in the area of the general surgical encounter.

I truly would appreciate your response with regard to these matters. They are intensely important in the management of my patients and certainly take precedent over whether or not I get anybody well.

Sincerely,

John B. Fenning, M. D.

Physicians in the News

David M. Shapiro, M.D. was reelected to a two-year term on the Governing Council of the FMA Young Physicians Section representing District B. Last June, Dr. Shapiro was elected to the Governing Council of the AMA's Young Physicians Section. ■

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NEW MEMBER APPLICANTS

Application For Membership

Active members are requested to express to the Board of Censors or Board of Governors any information or opinions they may have concerning the eligibility of the applicants.

WALTER H. HARVEY, D. O.

Dr. Walter Harvey was born in Shreveport, Louisiana. He received his medical degree at Kirkville College of Osteopathic Medicine in Kirkville, Missouri. He completed his internship and residency at Riverside Hospital (formerly the Osteopathic Hospital of Wichita) in Wichita, Kansas. Dr. Harvey attended fellowships at the M.D. Anderson Cancer Center in Medical Oncology and at the Brooke Army Medical Center in Hematology/Oncology both in Houston, Texas.

Dr. Walter Harvey practices Hematology/Oncology at 3840 Broadway with Drs. Harwin, Teufel, Reeves and Hart (Associates in Hematology & Oncology). ■

**ERIC C. BOROCK, M. D.**

Dr. Borock was born in New York, New York. He received his medical degree at Sackler School of Medicine in Rochester, New York. He completed his internship and residency at Maimonides Medical Center in Brooklyn, New York. Dr. Borock attended a fellowship at Hartford General Hospital in General Surgery in Hartford, Connecticut.

Dr. Borock is practicing General Surgery at 1435B S.E. 8th Terrace, Cape Coral. ■

**JOHN BERT DAVIS, M. D.**

Dr. J. Bert Davis was born in Prentiss, Mississippi. He received his medical degree at the University of Mississippi Medical Center in Jackson. He completed his internship and residency at the University of South Florida in Tampa and fellowships in Otolaryngology and surgery also at the University of South Florida.

Dr. Davis is practicing Otolaryngology/Facial Plastic Surgery at 1510 Royal Palm Square Boulevard with Dr. Jeff Comer. ■

**RONALD I. WEINER, D.O.**

Dr. Ronald Weiner was born in Philadelphia, Pennsylvania. He received his medical degree at the Philadelphia College of Osteopathic Medicine. He completed his internship and residency at Kennedy Memorial Hospital in Stratford, New Jersey. Dr. Weiner attended a fellowship in Cardiology at the Deborah Heart & Lung Center in Browns Mills, New Jersey.

Dr. Ronald Weiner is practicing Cardiology/Internal Medicine at 13691 Metropolitan Parkway, South, Suite 260 in solo practice. ■



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MEDICAL SOCIETY MEETING

Royal Palm Yacht Club

Cocktails 6:30 PM
Dinner 7:00 PM

MARCH 16, 1992

SPEAKER:

Joseph Von Thron, M.D.
Ch., FMA Delegation to AMA

TOPIC:

What Has the AMA & FMA Done For Me?

DINNER BY

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