LEE COUNTY MEDICAL SOCIETY





THE VOICE OF LEE COUNTY MEDICINE

VOLUME 28, NO.2

FORT MYERS, FLORIDA MARY C. BLUE, M.D.

APRIL 2004

NO GENERAL MEETING IN APRIL

NEXT GENERAL MEETING

THURSDAY MAY 20, 2004

6:30 p.m. - Social Time 7:00 p.m. - Dinner/Program at the

Royal Palm Yacht Club 2360 West First Street Downtown Fort Myers

Speaker: Rudolph Kotula, M.D.

Topic: "Travel Medicine"

Reservations: LCMS, P.O. Box 60041 Fort Myers, FL 33906-0041 Tel - 936-1645 Fax - 936-0533

If you have a new partner coming to your practice, please call The Society office for an application at: 936-1645.

Inserts

FOREIGN LANGUAGE
 INTERPRETERS LIST

O FLAMPAC LETTER TO SENATE CANDIDATE

10 WHAT THE LCMS DOES FOR YOU

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Mark your Calendars

9TH ANNUAL LEGAL-MEDICAL CHALLENGE CUP "The Battle of the Professions"

Note Date Change: Saturday, May 15, 2004

Renaissance Country Club 12801 Renaissance Way Fort Myers, FL 33912 (Off Daniels, near I-75) \$190.00 Per Team



President's Message

'TIS THE SEASON

Douglas Stevens, M.D.

The 2004 season is winding down and the 2004 legislative session is winding up. By the time you read this article we will have staged our "Doctor's Day at the Capital" in Tallahassee. I know how hard it is to take a day out of the office and what a loss that represents, however for those who were able to make the sacrifice I say "thank you" for heeding the call. It places us in the center of the minds of the

legislators as they start their work on this year's agenda. With the Governor and the House behind us we are held up for ransom only by the members of Senate. They know that we are watching and that they will be held accountable.

In the meantime hang on out there. This is the time we all work a little harder and give a little more. Our trauma center, although still in peril, has made it for another year. Our hospitals are expanding and renovating during a time when many communities have suffered closings. Our community is vibrant and growing. Our goals are just and clear – we have a unified message and many influential people with us. We have much to be thankful for.

I wish you all health and happiness.

Congratulations

LCMS ALLIANCE & BETTY RUBENSTEIN 2004 AMAA LEAP AWARD WINNER

The American Medical Association Alliance (AMAA), in partnership with the American Medical Association Political Action Committee (AMPAC), will present its second annual legislative Educational and awareness promotion (LEAP) awards at the AMAA annual meeting in Chicago in June. This recognition, for excellence in legislative projects, is awarded to just one county Alliance and one state Alliance each year. Betty Rubenstein's tireless work with legislation and her innovative program of linking groups of Alliance members to form MD-1000 Club memberships along with the participation of Alliance members supporting the MD-1000 Club, have earned Lee County the prestigious Award this year.

A MESSAGE TO ALL PHYSICIANS FROM AMA PRESIDENT DONALD J. PALMISANO, M.D.

I have talked a lot lately about myths, misrepresentation, facts and accountability in the medical liability reform debate. And I've talked about how I believe that we who favor reform are holding the trump card -- the truth.

We've demonstrated that caps on noneconomic damages work -- such as MICRA, which for more than a quarter century has stabilized insurance rates in California.

We've debunked the myth that insurance companies' stock market losses are what drive skyrocketing medical liability premiums.

And we've exploded the claim that aggressive litigation makes medical care safer by

punishing physicians when errors occur.

These truths -- and more -- can be found in the document "Medical Liability Reform -- Now!" available

in pdf on the AMA's Web site (www.ama-assn.org/ama1/pub/upload/mm/-1/mlr2004.pdf).

In last month's column, I addressed the issue of accountability for those lawyers who hope to strike it

rich by filing frivolous suits and intimidating doctors.

Tertullian, A Roman cleric in the second century, wrote "Truth engenders hatred of truth. As soon as it appears, it is the enemy." That's how it appeared when my e-mail box filled up with replies from some trial lawyers after last month's column. Many were angry, a couple were unprintable and some offered a civil debate on this issue.

Here are a few excerpts:

"Your article (and you) are full of crap. You want to restrict the right of ordinary people to seek compensation for medical injuries. You mean merely to incite the passions of an already overpaid profession which is angry because they have to be accountable."

Just to be clear, the AMA does not oppose compensating an injured patient for medical expenses and lost wages. If there's been a wrong, we want it made right.

And we also want accountability for all -- for attorneys and physicians -- and that includes those who

And we also want accountability for all — for attorneys and physicians — and that includes those who give false testimony using junk science to perpetuate a meritless claim that should not have been brought in the first place. Our quest is to maintain access for patients in their hour of need. The current system is destroying access.

Another e-mail: "Stop being a pawn for the abusive insurance industry." Medical liability insurance companies are a convenient scapegoat, but they are required by law to make conservative investments. They typically place about 80% of their investments in the bond market – not the stock market. According to A.M. Best Co., the investment yields of medical liability insurers have been stable and positive for the last five years.

If you think we're a "pawn," you are mistaken. Visit the Litigation Center on the AMA's Web site (www.ama-assn.org/go/litigationcenter). There you will find ample evidence that we take on insurers when we document that they have done harm to patients and physicians.

Here's another e-mail: "Peer review may be one part of the solution, but it should be serious, responsible peer review of doctors and hospitals.... Shining the light of investigation on negligence incidents would do more to reduce medical errors, thereby reducing malpractice claims."

continued on page 3......

As I Recall...

Roger D. Scott, M.D.
CALVERT COURIER

What a surprise to find the following editorial appearing in the CALVERT COURIER October 1957 in Baltimore Maryland!

"Speaking of credit, who should deserve it more than Dr. Roger Scott who terminated his

"Speaking of credit, who should deserve it more than Dr. Roger Scott who terminated his tour of duty at this hospital September 30th. Weekdays, Saturdays, Sundays, holidays, morning, noon, or night, that's when he was on duty-anytime and all the time. In the few months he was here, his name became a byword. As a surgeon, he performedfrequently and well, and for this his many patients will be everlastingly grateful. As a cheerful and friendly person with an unfailing sense of humor, he brought much that we will all remember. Good luck to you, Doctor, wherever you go and whatever you do."

I felt especially honored by this "horn tooting" that was published in the monthly newspaper by the inmates of the Maryland State Penitentiary in Baltimore on Calvert Street. A rat packer I am (while I frequently mistype, I meant packer) & just recently uncovered this "keepsake" from my youth. Few people know that I was in the "Pen" for four months!

The prison hospital with about 14 beds & a nice operating room had just been built within the massive dark & dreary granite walls of the prison. The University Hospital thought it would be good to assign a Chief Surgical Resident to the pen so that all prisoner surgery could be performed there instead of at the University Hospital. I was chosen for the first trial of four months to be THE surgeon for the entire penal system of the state. The salary was about \$250 a month, which was a boon as that doubled my chief resident's salary.

Life in the pen was totally different & here are a few remembrances. All the prisoners are a few remembrances. All the prisoners

Life in the pen was totally different & here are a few remembrances. All the prisoners decried 'not guilty' except for our great X-Ray technician, a former insurance salesman. He admitted guilt at having shot & killed (in his own bed) his wife & her lover. Most of the inmates seemed grateful to have me there. I had no fear of a malpractice suit, but of a shiv (knife) in the back.

(knife) in the back.

One week all the post-op patients needed more & more narcotics and still complained of pain. They all enjoyed a "fix", but all at one time was unusual. I had the medical examiner's toxicologist analyze all the injectable narcotics & found mostly H2O with a trace of narcotic! Well, off to solitary confinement for my now untrusted trustee ward clerk for stealing the narcotics.

The last hanging in the state of Maryland occurred during my tour, and the warden (also the happy hangman) asked me to be present and pronounce the prisoner dead. I declined this invitation as I always felt it was my job to sustain life. The warden did show me the gallows and explained that a proper hanging causes fracture of the cervical vertebrae with transection of the spinal cord rather than strangulation or avulsion of the head from the body. The weight and height of the victim are used to calculate how far he must drop when going through the trap door. A sandbag of the victim's weight hangs from the gallows to stretch the new rope for about a week before the execution.

Continued on page 3.....

LEE COUNTY MEDICAL SOCIETY BULLETIN

P.O. Box 60041 Fort Myers, Florida 33906-0041 Phone: (239) 936-1645 Fax: (239) 936-0533 E-Mail: awilke@lcmsfl.org Website: www.leecountymedicalsociety.org FMA: www.fmaonline.org

AMA: www.ama-assn.org The Lee County Medical Society Bulletin is published monthly, with the June and August editions omitted. CO-EDITORS

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

PRINTERS

Distinct Impressions 482-6262

MEMBERSHIPACTIVITY

NEW SATELLITE OFFICE Drs. Kini, Roggow & Galang Kenneth Galang, M.D. 9132 Bonita Beach Road Bonita Springs, FL 34135 239-768-5454 (T)

RELOCATING PRACTICE Evelyn Kessel, MD Brent Myers, MD Digestive Health Specialists, PA 8380 Riverwalk Park Blvd #200 Fort Myers, FL 33919 239-561-7337 (T)

NEW PRACTICE H. Scott Harris, MD Associates in Digestive Health, LLC 665 Del Prado Blvd., Ste l Cape Coral, FL 33990 239-772-3636 (T)

Cecil Beehler, MD Marlin Vision Center 1224 Del Prado Blvd. Cape Coral, FL 33904 239-772-4057 (T)

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NEW MEMBERS Juan Carrere, M.D. Patrick Daily, M.D. John Debarros, M.D. Patrick Landefeld, M.D. Michael Novotney, M.D. Robert Strathman, M.D. Leffrey Zimp, M.D. Jeffrey Zimm, M.D.

REJOINED William Kokal, MD Surgical Associates of SWFL 2675 Winkler Ave, Ste 490 Fort Myers, FL 33901 239-275-6659 (T)

RETIRING
Congratulations on the retirement of
Cecil Miller, M.D.
Howard Sheridan, M.D.

RESIGNED Thomas P. Lo, M.D.

LCMS ALLIANCE AND FOUNDATION NEWS

Submitted by Lynne Bacon, Co-President

Progress continues at a steady pace in our efforts to collect signatures for the Citizens for a Fair Share amendment. Volunteers worked the polls in largely Democratic precincts in the primary election, but results were not as high as anticipated due to both low voter turnout and the 50-foot buffer zone required by election law, which kept the voters a good distance from our table. Following a disappointing two hours at one polling location, which produced only two signatures, the volunteers moved to an area hospital to distribute petitions until returning to the polls for a hoped-for lunch surge. While the surge never materialized (isn't it amazing how few people determine elections), our collectors persevered and ended the day with over a hundred

Our stalwart volunteers on this election Tuesday were LYNNE GOROVOY, JODI JOHNSON, JENNIFER KIM, CHERI O'MAILIA, LISA ROLAND, ANN WILKE, SHERRY ZUCKER, and LINDA CHAZAL who organized and staffed the day. They also have worked on CHARAMONE, ANA GREGG, JUDY KASH, SUZANNE KOTULA, LEANNE LUERHMAN, BARBARA RODRIGUEZ, BETTY RUBENSTEIN, FELINDA RUBIN, TAMI TRAIGER, JANE WEST, and yours truly have joined them. Many, many thanks to all, and especially to JODI JOHNSON, who works diligently at staffing our local efforts, and CHERI O'MAILIA, who is the FMAA legislative chairman and supports efforts throughout the state. Although they have full schedules with families and/or jobs, all of these women have dedicated much time and energy to see that this very important amendment gets passed. If we are to meet our deadline, however, we MUST have more participation.

Preliminary studies have shown that this constitutional amendment will pass by a huge margin if it makes it to the ballot, but it will never get there if we do not collect these signatures. PLEASE make every effort to collect in your practices. We are doing as much as we can at the hospitals given the help that we have. On average, we collect 35 signatures per two-hour shift. With an invalidation rate of 20-30%, Lee County needs a total of 40,000-50,000 signatures. We have 10,000 at this point. If 500 physicians in the county collected only 60 signatures each, we would handily reach our goal. Considering the importance of ensuring access to quality care in our state, no one should feel uncomfortable asking patients to support this amendment; however, if you do not wish to ask your staff to solicit signatures, please invite your spouse to help. JODI JOHNSON, CHERI O'MAILIA, LINDA CHAZAL or I will be happy to give your spouse petitions and fact sheets, as well as answers to any questions you might have.

Dr. Steven West was on hand to answer our questions and update us on the petition drive and some of the behind-the-scenes legislative wrangling in Tallahassee at the Florida Medical Association Alliance's Southwest District Workshop in Port Charlotte last month. Throughout the state, the petition drive is gathering momentum, and public support is mounting, as we await the expected favorable constitutional review by the Florida Supreme Court. The goal is in sight; with your help, we will reach it.

In other Alliance news, the nominating committee is putting together a dynamic slate of incoming officers, and our March "Lunch with Friends" served valuable networking goals as we look forward to next year's projects. Our April meeting will refresh our knowledge of local history as we tour the Edison/Ford estates. Supper Club is an ongoing party you won't want to

The LCMSA Foundation's Buckle Bear program continues teaching youngsters car safety awareness, while our new Stride Right program at Diplomat Elementary School is a model for educating students in healthy lifestyle choices. The Mini-Grant committee has signed, sealed, and delivered over \$20,000 in grants to area health-related charities, courtesy of last May's Gala. Although the February fashion show produced some donations for the Foundation, much more will be needed in order to fund next year's mini-grants. The decision was made to forego a major fund raising event this season in order to concentrate our efforts on the petition drive. With that in mind, we are asking each of you to contribute generously when you receive your up-coming invitation to a no-show event to raise money for the Community Needs Fund of our Reaching Out Program of Giving. We need your financial support so that the Foundation can continue to fulfill its mission.

NEW MEMBER APPLICANTS Application for Membership

Active members are requested to express to the Committee on Ethical and Judicial Affairs or Board of Governors any information or opinions they may have concerning the eligibility of the applicants.



THOMAS B. JOHNSON, MD - EMERGENCY MEDICINE Medical School: New Jersey Medical School, Newark,

New Jersey (1993-97) Internship & Residency: Orlando Regional Medical Center, Orlando, FL (1997-2000)

Board Certification: American Board of Emergency Medicine. Dr. Johnson is with Southwest Florida Emergency Physicians, at 2727 Winkler Avenue, Fort Myers, FL 33901.



LAERTES A. MANUELIDIS, MD - DERMATOLOGY Medical School: Yale School of Medicine, New Haven, CT (1993-97)

Internship: Hospital of St. Raphael, New Haven, CT (1997-98) Residency: Yale School of Medicine, New Haven, CT (1998-2001) Fellowship: Medical University of South Carolina, Charleston, SC (2002-2003)

Board Certification: American Board of Dermatology. Dr. Manuelidis is in practice with Associates in Dermatology at 8381 Riverwalk Park Blvd, Fort Myers, FL 33919.

"MED MAL INSURANCE: WHO'S STILL WRITING POLICIES?

Although the number of physicians in Florida who are "going bare" continues to grow, there are still a number of insurance carriers still offering medical malpractice insurance coverage. Please note, the list of providers includes:

ProAssurance/ProNational Insurance Co, Inc

ProAssurance offers claims-made policies to physicians who fit restricted underwriting criteria. One of the largest medical liability insurers in the country, they insure more than 2,500 Florida physicians. For a rate analysis contact them at Huntington Centre II, 2801 SW 149 Avenue, Suite 200, Miramar, FL 33027. Contact: David Goss dgoss@prossurance.com or telephone 1-800-222-5115.

First Professionals Insurance Company (FPIC)

The largest malpractice insurer in the state with more than 6,000 Florida insured physicians. The company has been writing policies since 1976. For rate information call 800-471-9742 or Marie Allison located at 1000 Riverside Avenue, Suite 800, Jacksonville, FL 32204

The Doctors Company

This company was formed in 1976 to sell medical malpractice policies only. Coverage includes government audits and state-licensing board reviews. This carrier only insures physicians with a national association affiliation such as the American Board of Internal Medicine, American College of Surgeons and others. Office location is 85 Greenwood Road, Napa, CA 94558. Call the Sales Department at 800-352-0320.

Physicians Insurance Company
This company only began writing medical liability policies in March 2003, but is aggressively seeking new business. Currently they insure 6,300 Florida physicians, some with prior acts. Contact Lyn Zoldak at 225 NAE Mizner Boulevard, Suite 680, Boca Raton, FL 33432 or 1-877-800-2259.

Mag Mutual

The Florida Department of Insurance Regulation reports this company is still writing policies in Florida, but the company itself has refused to comment. Call 470-370-3813.

Pediatricians Insurance Risk Retention Group of Florida

This physician-owned company received state approval to offer policies to general pediatricians as of January 1, 2003. Physicians can be refused insurance if the group feels the doctor presents too much exposure. Contact Eugene Rosov at 305-751-9195 or 5891 NE Sixth Avenue, Miami, FL 33137.

Healthcare Underwriters Insurance Group of Florida

Medical Association
This non-profit, doctor owned insurer received approval to start writing policies as soon as capitalization is complete which was November 11, 2003. Regulations required they buy in equivalent to one year's growth of mature, claims-made premium. Coverage can be refused if the physician fails to meet underwriting standards. Call Steve Salman 1815 Griffin Road Suite 1010, Dania, FL 33004 or at 954-923-1900

Florida Healthcare Providers Insurance Exchange

This MD-financed medical malpractice insurer expects to offer policies in association with Duane Morris LLP, a national law firm with Florida office in Miami and Palm Beach. Call Chris Pestera at 954-336-7284.

Florida Medical Malpractice Joint Underwriting Authority

When no other company will write an insurance policy, there is JUA. The bad news is that it's an occurrence policy so you must purchase a tail. The physician must go through a Florida insurance agent to obtain an application. Within a five-seven day period the physician is required to pay 40 percent of the annual premium and the balance is due within 90 days. Contact Connie Stahley at 800-836-6003 or write P.O. Box 15021, 5814 Reed Road, Fort Wayne, IN 46885.

GE Medical Protective
Writing policies in Florida since 1992, insures 2,350 Florida physicians. Though this company stopped issuing policies some time ago, they expect to resume if permitted rate increase by the state Office of Insurance Regulations

passes. Reprinted Florida Medical Business Volume 16, Number 22

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HATTE 11 ACCOUNTS ON

FPIC is endorsed by the Lee County Medical Society

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FPIC Policyholders Have a Safe Haven

(continued from page 1 A Message from AMA President)

The Institute of Medicine and the Health and Human Services Department say most medical errors are not failures of physicians, but failures of the system. Even when doctors do their jobs correctly, most errors would still occur.

A better approach to fixing the problem of system errors would be to dispel the fear of physicians, hospitals, and nurses that open discussion on adverse events would be discoverable in lawsuits.

physteriars, hospitals, and nurses that open discussion on adverse events would be discoverable in lawsuits.

That's why we support the Patient Safety and Quality Improvement Act (S720), a proposed federal law his would be shared on how to improve the system and therefore patient safety. Experies. The result would be advice on how to improve the system and therefore patient safety. The system fix would be shared with all in a de-identified manner. This model works for the Aviation Safety Reporting System, It would work in the health care field, too.

The AMA siso helped launch the National Patient Safety Foundation in 1996 and has aupported it since with more than \$8.55 million dollars. Despite our repeated public challenges to matern our donations, the Association of Trial Lawyers of America has not contributed a dime.

Another e-mail quoted the opening line of my last column: "The United States delivers the best quality of medical care in the world," and continued with this contentions. "Thanks in no earted serve in the courageous efforts of the trial attorneys who are willing to challenge the carefess doctors who are shielded by a medical establishment that subbomly refuses to hold them accountable."

The results of the trial attorneys who are willing to challenge the farmer and the substance of any correlation between Javania awaids or settlements and necessary of the trial attorneys who are suffered to challenge the farmer are accountable."

them accountable."

There is no evidence of any correlation between lawsuit awards or settlements and negligence, and accountable."

There is no evidence of any correlation between lawsuit awards or settlements and negligence, and lawsuits do nothing to enhance patient safety. Troyen A. Brennan led a 1996 Harvard study that found that the only significant predictor of payment to medical malpractice plaintiffs in the form of a jury verdict or a settlement was disability, and not the presence of an adverse event due So why are there trivolous suits? Is it because, as former Chief lustice Warren Burger said, So why are there trivolous suits? Is it because, as former Chief lustice Warren Burger said, "The courtrooms of America all too often have Piper Cub advocates trying to handle the controls of losing 1/47 litigation."

"The countrooms of America all too often have Piper Cub advocates trying to handle the controls of lawyers it hely had to live within the same rules as doctors. Like the government ordering them to serve "legal care" clients and be paid a fee determined by a formula based on the gross of lawyers if they had to live within the same rules as doctors. Like the government inspections of lawyers and to live with this every day.

Can an existence of the constructions to ensure their complex charts and billing are in order. Doctors can be considered to surprase government inspections that have to live with this every day.

Regardless of whose views prevail as to how to change the system, there will, ultimately, be change to live with this every day.

Regardless of whose views prevail as to how to change the system, there will, ultimately, be change on who can be paid to be a solonge their practice such change patients will lose access to care as doctors retire early, limit their practice such climates.

To all those who responded. I appreciate the effort you took to express your views prome, I pipe inability. This

Commerce who responded, I appreciate the effort you took to express your views to me. This open exchange of ideas is an important part of what makes America so great.

To all those who responded, I appreciate the effort you took to express your views to me. This open exchange of ideas is an important part of white precired in New Orleans and the AMA President. He is also an attorney. Visit his Web page (http://www.ama-assn.org/ama/pub/category/1895.html) or contact him by e-mail (donaid palmisano@ama-assn.org).

(continued from page 1 Calvert Courier) As I Recall

The warden was exceedingly proud of his expertise and, as this was the last hanging, he kept the hangman's knot as a trophy but one day it "disappeared" from his office. Funtously he searched the prison but failed to retrieve his trophy!

the airtight door to the gas chamber was sealed. Mirtic (?) acid was then released into a basin me airtight door to the gas chamber was sealed. Mirtic (?) acid was then released into a becoming the voicim's chair, and then using an airtight connection, the cyanide cross to concern the cyanide gas to fill the chamber. The nervous executioner (his first time with this process) erroneously released the cyanide tablets into the pan and then open valve into the witness room and there was a rapid emergency evacuation. Sure glad I didn't attend that one cither. Fortunately, only the victim perished.

Years later we saw a great movie, AND JUSTICE FOR ALL, with Al Pacino, filmed in Baltimore. The final scene of hostage taking & shootout was done in my Maryland State ben Hospital!

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The final scene of hostage taking & stootout was done in my Maryland state benefit to the missing the tree in an unusual group of people in an unusual environment with the realization that there much find to some & great expectations for others in a new life outside those walls. The first cyanide execution also occurred during my time, and again I declined. The expert hangman became the inept "gaser" due to a comedy of errors. The execution chamber was airtight to preventleakage of cyanide gas into the winess room. The victim was strapped in the chair and the airtight door to the gas chamber was sealed. Mitric (?) acid was then released into a basin the price of the property of the pro

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early or often enough. Having a reputable independent lawyer aware of the situation and in periodic confact with the insurance company thred defense counsel is the safest way to proceed. The independent lawyer can make demands upon the insurance carrier that the carrier bird lawyer may not feel comfortable doing.

Mr. Hersch is a partner with Sheppard, Brett, Stewart, Hersch & Kinsey, P.A., 2121 West First St, Fort Myers.

6. Failure to hire independent private legal council. Most defense lawyers will recommend that an independent lawyer be hired to represent the physicians on many but not all cases. The lawyer hire carrier obviously has some allegiance and duty of courtesy to the carrier, and in the opinion of many defense lawyers, some do not refer their physician elients to independent counsel opinion of many defense lawyers, some do not refer their physician elients to independent counsel.

5. Not using appropriate worry and crisis management techniques. It is easy to panie and waste energy or attempt to genore an anxiety ridden process. Controlling the process with the waste energy or attempt to genore and doing everything reasonably possible to handle the situation, while understanding realistic exposure that can certainly be survived are good steps to take in order to keep a malpractice action from ruining quality of life, professional disposition, and future actions to the control of the situation.

4. Failure to take steps to protect assets and the medical practice. Notification of a possible claim does not necessarily signal the end of the ability to take actions to protect assets and the apicing does not necessarily signal the end of the ability in the negligible chance, if any, of a potential verdict in excess of liability limits may be appropriate first steps that should be taken without delay while a malpractice case is being detended. The ability to settle a case may hinge upon telling Plaintiff's counsel that there are no exposed assets so that the limits of liability should be accepted.

3. Failure to request that the carrier settle the case. It can make a big difference as to overall results if a dector is sculed out of the case carlier rather than later, if a case is sculed while the results if a dector is sculed out of the case carlier rather than later, if a case is sculed while the insurance carrier if they have not taken all appropriate steps to scule the case within policy limits. Asking the carrier not to scule one detrimental to the physician in a number of ways.

2. Failure to ask the insurance carrier to assign a well-known and respected defense lawyer to the case. Abost majpractice carriers have a list of lawyers have more or less experience and different adjusted and patients of practice. Asking the carrier have more or less experience and different adjusted and patients of practice. Asking the carrier early on to allow the physician and the physician's other advisors to help select and maintain communications with 'the right lawyer' can be an important step.

I. Altering the Chart Notes. While facts may be remembered or are obvious, but are not clear in the chart notes, it is possible to dictate and appropriately update notes, but any back dating or alternation of notes can backfire catastrophically.

Craig R. Hersch, Esq RESPECT TO MALPRACTICE CLAIMS THE SIX BIGGEST MISTAKES THAT DOCTORS MAKE WITH more information and to receive these pneumonia vaccine-screening tools, please call Brian Saia of Merck Vaccine Division at 1-800-737-2088 ID#13060 or you may e-mail him at brian_saial@merck.com. determine which of your patients are eligible for pneumonia vaccine. I encourage you to use them. For There are some great screening tools available to assist you with patient education and in helping you

vaccinated 5 or more years previously and were less than 65 years old at the time of primary vaccination. There should be a five-year interval since the previous shot if given under age 65. The Centers for Disease control have recommended that a person needs only two pneumonia shots in their condition. For adults older than 65 years of age, one-time revaccination is recommended if they were preventable through vaccination. PNEUMONIA VACCINATIONS SHOULD BE ADMINISTERED YEAR ROUND. It is recommended that patients in the above risk groups receive a one-time dose, five years after the first dose. Second shots are the physician's decision based upon their patient's medical

EXPERIENCE THE DIFFERENCE "

AMONG YOUR ADULT CLIENTS IMPORTANCE OF SCREENING FOR PNEUMOCOCCAL VACCINE

A Message from the Lee County Adult Immunization Coalition By David Fee, Florida Department of Health, Bureau of Immunization

disease, and is a leading cause of death among Florida's over-65 population and those with chronic Pneumococcal Disease, caused by the bacterium Streptococcus Pneumoniae, is a life threatening

disease.

Hodgkin's Disease

Asplenia – removal of the spleen Any condition associated with an impaired immune system

The important thing to remember is that Pneumonia caused by Streptococcus Pneumoniae is

Sickle cell anemia

History of Alcoholism

Cancer HIV/AIDS

All persons 65 years of age and older. Those with chronic diseases, such as heart disease, lung disease, diabetes, kidney disease or liver

disease. The following patients should receive the pneumonia vaccine:

Bonita Springs, Port Charlotte Fort Myers, Naples, Cape Coral, Offices in:

of Southwest Florida

Retina Consultants

For more information, please call

www.eye.md 1828-282 (008) In Fort Myers (239) 939-4323

ANATOMY OF AN ANNUITY - PART 2 By Sandra Washburn, Financial Consultant

When You Retire

When you are ready to start using the money you have accumulated, you enter the payout period. Variable annuities offer a number of payout options, allowing you to select a plan that

period. Variable annuities offer a number of payout options, allowing you to select a plan that best fits your needs. Generally, there are three payout options:

**PLIMPS-VARIABLE STATES STAT

payment rate, which can vary by the age and sex of the annuitant. There are two options:

-Fixed Annuitization – The amount of your income payments is fixed and will not fluctuate. You may choose income for life or income for a certain number of years, and the amount you receive

will depend upon the option chosen.

-Variable Annuitization — The amount of your income payments (for life or a certain number of years) will depend on the current value of the underlying investment, which varies over time. A variable annuitization payout option gives your money the best chance of keeping pace with inflation.

With non-qualified money, annuity income payments are tax-advantaged because part of each payment is considered return of principal and therefore is not taxable. Please note that most annuitization options are irrevocable.

Fees and Charges: A variable annuity has two types of expenses – an investment management fee and an insurance contract fee. The investment management fee may range from .25% to 2% per year, depending on the type of investment portfolio you choose. The insurance contract fee also varies, but most companies charge between 1% and 1.5% Contract owners may also be assessed an annual contract fee of between \$30 and \$40 (in most cases, this charge is dropped with assets in excess of \$50,000).

Most annuities are offered without an initial sales charge. However, canceling the contract during the earlier years may trigger an early withdrawal (surrender) charge. This charge ranges from 5% to 9% in the first year and declines to 0%, generally after seven years. However, as long as you remain committed to accumulating money and leave your money in long enough,

you will not incur a surrender charge.

<u>Choose Carefully:</u> Before choosing an annuity, it is important to take several things into consideration: the investment selections, the historical performance of the underlying portfolios, the income options, insurance features, fees and charges, and of extreme importance, the soundness of the insurance company offering the annuity. In addition, ask yourself: When do I want to retire? How much income will I need when I retire? What assets will I have to draw on during retirement? Do your research and consult with an investment professional about specifics. By doing your homework you will be able to determine whether annuities should be part of your overall retirement plan.

* Annuities are long-term, tax-deferred investments intended for retirement planning. Withdrawals of certain earnings or other taxable amounts are subject to income tax and, if made prior to age 59 ½, may be subject to an additional 10% federal tax penalty. Early withdrawals have the effect of reducing the death benefit and contract value. Guarantees are backed by the claims-paying ability of the issuing insurance company. Investments in the variable portfolios will fluctuate and may be worth more or less upon redemption.

INVESTMENTS IN SECURITIES, ANNUITIES, AND INSURANCE: ARE NOT FDIC INSURED, ARE NOT BANK GUARAN-TEED, MAY LOSE VALUE BROKERAGE SERVICES ARE OFFERED THROUGH FIRST CITIZENS INVESTOR SERVICES. INC. MEMBER NASD/SIPC First Citizens Investor Services, Inc., is a non-bank subsidiary of First Citizens Bank First Citizens and Atlantic States Bank are subsidiaries of the same financial holding company. This article was provided by Brenda Dolan, Vice President of Atlantic States Bank. Brenda is a Medical Financial Specialist with the bank. For more information contact Brenda at 239-985-2205 or Sandi Washburn at 239-659-2806.

PAID ADVERTISEMENT

COMMUNICATING WITH YOUR LEGISLATORS

The Florida Legislative Session began March 2, 2004 and will continue until April 30, 2004. Do you know how to address your legislators? When you are contacting your legislator either in person, by phone or in writing there are several things to keep in mind.

10 TIPS ON HOW TO GET ALONG WITH YOUR LEGISLATOR

BE FAIR – Remember that your legislator represents all of his or her constituents regardless of party or group affiliation. Don't condemn a legislator because he or she has taken a position you personally do not agree with.
 BE UNDERSTANDABLE – Try to put yourself in your legislator's place. Try to understand his or her problem, outlook and aims. By having empathy for the legislator, he or she will be more inclined to listen objectively to your position and understand your problem.

ly to your position and understand your problem.

3. BE REASONABLE – Recognize that there are legitimate differences of opinion. Never be vindictive!

Continue to develop the relationship event though he or she may not vote your way. A legislator who votes against your position one day may very well be the deciding vote in your favor the next day.

4. BE FRIENDLY – Do not contact your legislator only when you want something done. Invite your legislator to local Board meetings, perhaps as a speaker. Go out of your way to keep in touch throughout the year.

5. BE THOUGHTFUL – Treat your legislator the way you would like to be treated. Let him or her know that you appreciate the good things they do. The golden rule applies in politics, too.

6. BE COOPERATIVE – If a legislator asks for help let him or her know that you can be relied on no matter how busy you are. Your assistance will be appreciated and remembered.

7. BE REALISTIC – Do not expect everything to go your way. Be ready at all times to consider the issues involved and compromise if necessary.

involved and compromise if necessary,

8. BE ACCURATE - Always be sure to have the necessary information and to do a good job at

presenting your case. The only way to gain credibility is to know the issues thoroughly.

9. DON'T BE A BOTHER – Legislators do not like to be pestered, scolded, preached to, or "loved to death".

10. BE HONEST – Never stretch the truth to make your argument more saleable. If you learn new facts that would revise your assumptions, do not hesitate to bring the new situation to the attention of the legislator you have been contacting.

HOW TO WRITE YOUR LEGISLATOR

 Know your legislators' district(s) and the correct spelling of their names. Refer to district maps and directories.

2. Use the following format for addresses:

Senators: The Honorable John Doe Governor: Burt Saunders The Florida State Senate Dave Aronberg The Capitol, Suite Tallahassee, FL 32399 Mike Bennett

Governor The Capitol Tallahassee, FL 32399 Lt. Governor:

The Honorable John Doe Representatives Jerry Paul Florida House of Representatives Lindsay Harrington The Capitol, Suite ---Tallahassee, FL 32399 Bruce Kyle Jeff Kottkamp Carole Green
Dudley Goodlette

The Honorable Toni Jennings Lt. Governor The Capitol Tallahassee, FL 32301

The Honorable Jeb Bush

Cabinet: Charlie Crist, Attorney General Tom Gallagher, Chief Financial Officer Charles H. Bronson, Commissioner The Honorable John Doe Title The Capitol Tallahassee, FL 32399

Write on personal stationary, FMA or CMS letterhead, or on plain paper. A personal letter is best! Your return

address should be on the letter, not just on the envelope. This will enable your legislator to reply.

Do not use post cards or form letters except when advised to do so by the FMA Legislative Affairs office or the Lee County Medical Society Executive.

A good rule to follow is one subject per letter. Try to keep your letter to one page no matter how important the issue. This gives your letter more impact and makes a reply easier. It also takes up less of the staff's and legislator's time.

Make clear the position of the issue you are on, and ask the legislator to support your position. Refer to exact bill numbers if available and short or popular titles.

Don't threaten or write in a belligerent tone.

Don't remind them of broken promises.

10. Don't write so often that your letters lose their impact.

11. Illustrate your position with a local example.

12. Sign your name legibly and type your name under your signature.

13. Time your letters to arrive far enough in advance to be effective.

14. If you have success be sure to write a thank you note.

*** Compiled from FMA articles ***

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FORT MYERS, FL 33906-0041 PO. BOX 60041 LEE COUNTY MEDICAL SOCIETY dires a tradition for the state of the state