

# Bulletin

*Editor: Ellen Sayet, M.D.*

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LEE COUNTY  
MEDICAL  
SOCIETY INC.

*Physicians Caring for our Community*





## Bulletin

13370 Plantation Road, Ste. 1  
Fort Myers FL 33912

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

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### Lee County Medical Society Mission Statement

*The mission of Lee County Medical Society is to advocate for physicians and their relationships with patients; promote public health and uphold the professionalism of the practice of medicine.*

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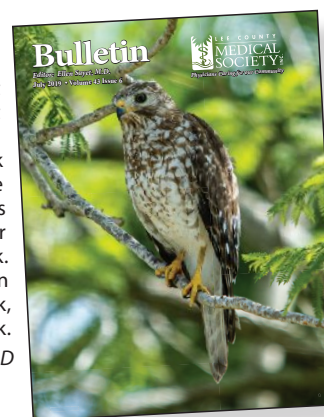
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#### Coldwell Bankers Family Beach Day

Dr. Guttery photographed this hawk in the Fort Myers/Cape Coral area. Cooper's hawk was first described by French naturalist Charles Lucien Bonaparte in 1828. It is a member of the goshawk genus *Accipiter*. This bird was named after the naturalist William Cooper, one of the founders of the New York Lyceum of Natural History (later the New York Academy of Sciences) in New York. Other common names; big blue darter, chicken hawk, hen hawk, Mexican hawk, quail hawk, striker and swift hawk.

Cover Photo Cooper's Hawk - Photo by Ed Guttery, MD



## Events RSVP online at [www.lcmsfl.org](http://www.lcmsfl.org)



Thursday, August 22nd, 2019

### General Membership Meeting

from 6:30 p.m. to 8:30 p.m.



Saturday, August 24th, 2019

### Family Beach Day at Sundial Beach Resort

from 11a.m. to 4 p.m.



## Save The Date

Friday, September 20, 2019

### Annual Medical Service Awards



## MEMBERSHIP NEWS

### MEMBERSHIP NEWS - RETIRED

**Bruce Berget, MD**

### MEMBERSHIP NEWS - MOVED FROM AREA

**Peter Lewis, MD**

### MEMBERSHIP NEWS - NEW APPLICANTS

**Beata Bednarska, MD** – received her medical degree at Warsaw Medical University, Warsaw, Poland in 1986. Dr. Bednarska completed a residency at St. Elizabeth Hospital, Chicago, IL from 1995 - 1998. Dr. Bednarska is in practice at LPG Surfside Clinic, 2441 Surfside Blvd., S 200, Cape Coral, FL 33914. Tel: 239-541-7500 Fax: 239-541-7501. Board Certified: Family Practice

**James H. Belcher, MD** - received his medical degree from the University of Kentucky College of Medicine, Lexington, KY in 2006. Dr. Belcher completed a residency in Family Medicine at Self Regional Healthcare, Greenwood, SC from July 2006 - June 2009. Dr. Belcher is in practice at Lee Community Healthcare – Dunbar, 3511 Martin Luther King Blvd. Fort Myers, FL 33916, Tel: 239-343-4910 Fax: 239-343-4911. Board Certified: Family Medicine

**Jessica Castaneira, MD** - received her medical degree from the American University of the Caribbean School of Medicine in Pembroke Pines, FL in 2015. Dr. Castaneira is in practice at LPG Family Medicine, 23450 Via Coconut Pt., Ste F, Estero, FL 33928. Tel: 239-468-1000. Board Certified: Family Medicine

**Sheldon Cho, MD** - received his medical degree at Seoul National University, Seoul Korea (South) in 1992. Dr. Cho completed a General Surgery internship and a Residency in Anesthesiology at Nassau County Medical Center, East Meadow, NY from July 1994 - June 1998. He completed a fellowship in Pain Management at Sloan Kettering Cancer Center, New York, NY from July 2001 - June 3 2002. Board Certified: Anesthesiology. Dr. Cho is in practice at Korunda Pain Management Center, 4513 Executive Dr., Naples, FL 34119. Tel: 239-591-2803 Fax: 239-594-5637. He is Board Certified in Anesthesiology

**Edwin Chung, MD** - received his medical degree at Suny Syracuse, Syracuse, NY in 1999. Dr. Chung completed an internship and residency in Internal Medicine from Long Island Jewish Medical Center, New Hyde Park, NY from July 2000 - June 2002. He also completed a fellowship in Nephrology at Brookdale Hospital, Brooklyn, NY from July 2006 - June 2008. Dr. Chung is in practice at Doc Care, 290 Nicholas Pkwy., NW Ste 1, Cape Coral, FL 33991. Tel: 239-573-1152 Fax: 239-573-1360. Board Certified: Internal Medicine, Nephrology

**William Coryell, MD** – received his medical degree at Michigan State University, East Lansing, MI in June 1978.

Dr. Coryell completed an Internal Medicine internship from July 1978 – June 1979 and a Diagnostic Radiology residency at Michigan State University from July 1982 – June 1985. Dr. Coryell completed a fellowship in Interventional Radiology from July 1985 – June 1986 at the University of Florida, Gainesville, FL from July 1985 – June 1986. Dr. Coryell is in practice at Radiology Regional Center, PA, 3680 Broadway, Fort Myers, FL 33901. Tel: 239-936-2316 Fax: 239-425-4798. Board Certified: Vascular and Interventional Radiology

**Suresh Dasani, MD** - received his medical degree at Medical College Baroda, Vadodara, India in 1981. Dr. Dasani completed residency in Transitional Residency at Mercy Hospital, Toledo, OH from June 1984 - May 1985, and another residency in Family Medicine at Broadlawns Medical Center, Des Moines, IA from June 1985 - May 1988. Dr. Dasani is in practice at LPG Internal Medicine, 1569 Matthew Dr., Fort Myers, FL 33907. Tel: 239-343-8224 Fax: 239-343-8221. Board Certified: Family Medicine

**Juan Fernandez de Castro, MD** - received his medical degree at Universidad El Bosque, Bogota, Colombia in 2001. he completed an internship and residency in General Surgery and Ophthalmology at the University of Louisville, KY from 2013 - 2017. Post Graduate Ocular Pathology and Molecular Ophthalmology from the University of Iowa from 2008-2010. Dr. de Castro is in practice at Eye Centers of Florida, 4101 Evans Ave., Fort Myers, FL 33901. Tel: 239-393-2778 Fax: 239-936-8776.

**Claudio Ferreira, MD** - received his medical degree at the Medical University of Vassouras, Rio de Janeiro, Brazil in 1992. Dr. Ferreira completed an internship in General Surgery and a residency in Ophthalmology from King Drew Medical Center, Los Angeles, CA from July 2000 - June 2004. Dr. Ferreira also completed a fellowship in Ophthalmology, Vitreoretinal at University of Virginia, Charlottesville, VA and university of Tennessee, Memphis TN from July 2004 - June 2006. Dr. Ferreira is in practice at Eye Centers of Florida, 4101 Evans Ave., Fort Myers, FL 33901. Tel: 239-393-2778 Fax: 239-936-8776. Board Certified: Ophthalmology

**Luis Guerrero, MD** - received his medical degree at Universidad Iberoamericana, Santo Domingo in 2007. Dr. Guerrero completed internship in General Surgery at Monmouth Medical Center, Long Branch, NJ from July 2009 - June 2010, and a residency in Physical Medicine and Rehabilitation at Monmouth Medical Center, Bronx, NY from July 2011 - June 2014. Dr. Guerrero is in practice at Lee Memorial Pain Management, 16281 Bass Road, #300, Fort Myers, FL 33908. Tel: 239-343-7110 Fax: 343-985-3650. Board Certified: Physical Medicine & Rehabilitation

**Paul Hurd, II, MD** – received his medical degree at Louisiana State University School of Medicine, New

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## Membership – New Applicants

*Cont'd from page 3*

Orleans, LA in May 2013. Dr. Paul Hurd, completed an Internal Medicine internship at Ochsner Medical Center, New Orleans, LA from July 2013 – June 2014 and a residency in Physical Medicine and Rehabilitation at Temple University Hospital/Moss Rehabilitation, Elkins Park, PA from July 2014 – June 2017. Dr. Hurd also completed a fellowship at Alabama Ortho Spine and Sports, Birmingham, AL from September 2017 – February 2019. Dr. Hurd is in practice at The Pain Medicine Group, 13782 Plantation Road, Ste #101, Fort Myers, FL 33912. Tel: 941-365-5672 Fax: 941-365-5854. Board Certified: Pain Medicine & Rehabilitation

**Ram Kafle, MD** - received his medical degree from Nepal Medical College, Nepal in 2005. Dr. Kafle completed a residency in Family Medicine at Hennepin County Medical Center, Minneapolis, MN from 2009 - 2012. Dr. Kafle is in practice at Bonita Bay, Lee Health, 2600 S Tamiami Trail, Ste 340, Bonita Springs, FL 34134. Tel: 239-495-4482 Fax: 239-495-4491. Board Certified: Family Medicine

**Rebecca Kimpel, MD** - received her medical degree at Hahnemann university College of Medicine in 1987. Dr. Kimpel completed an Internship in Internal Medicine at Dartmouth-Hitchcock Medical Center, Hanover, NH from 1987 - 1988. Dr. Kimpel also completed a residency in Internal medicine at Guthrie Medical Center, Sayre, PA from 1988-1990. Dr. Kimpel is in practice at Shell Point Retirement, 15051 Shell Point Blvd., Fort Myers, FL 33908. Tel: 239-454-2146 Fax: 239-454-2111. Board Certified: Internal Medicine

**Michael La Corte, MD** - received his medical degree at New York University, NY in 1971. Dr. LaCorte completed an internship and residency in Pediatrics at Bellevue Hospital, New York, NY from July 1971 - June 1973 and a second residency in Pediatric Cardiology at The Children's Hospital Medical Center, Boston MA from July 1973 - June 1976. Dr. LaCorte is in practice at LPG Cardiology, 13340 Metro Pkwy., Ste 400, Fort Myers, FL 33966. Tel: 239-343-7490 Fax: 239-343-5032. Board Certified: Pediatrics, Pediatrics Cardiology

**DeWayne Lockhart, MD** – received his medical degree at University of Alabama, Birmingham, AL in 2006. Dr. Lockhart completed an internship in General Surgery at Loyola University, Maywood, IL from July 2006 – June 2007 and a residency in Neurological Surgery at Loyola University, Maywood, IL from July 2007 – March 2009. He also completed a residency in Anesthesiology at the Medical College of Wisconsin, Milwaukee, WI from Feb 2010 – Feb 2013. Dr. Lockhart also completed a fellowship in Anesthesiology / Interventional Pain Management, Miami, FL from August 2013 – August 2014. Dr. Lockhart is in practice at Art of Medicine Pain

Specialists, 3555 Kraft Road, Ste 120, Naples, FL 34105. Tel: 239-424-9846 Fax: 239-424-9932. Board Certified: Anesthesiology and Pain Medicine

**David Marconi, MD** – received his medical degree at St. Matthews University, West Bay, Cayman Islands, in 2013. He completed a residency in Family Medicine at East Tennessee State University, Mountain Home, TN in 2016. Dr. Marconi is in practice with LPG Hospitalists Group, 9981 S. HealthPark Dr., Fort Myers, FL 33908. Tel: 239-343-2052 Fax: 239-343-5348. Board Certified in Family Medicine

**Kristina Mirabeau-Beale, MD** – received her medical degree at Harvard Medical School, Boston, MA in May, 2010. Dr. Mirabeau-Beale completed an internship in Internal Medicine at Brigham and Womens Hospital, Boston, MA from July 2010 – June 2011 and a residency in Radiation Oncology at Harvard Radiation Oncology Program, Boston, MA from July 2011 – June 2015. Dr. Mirabeau-Beale is in practice at 21<sup>st</sup> Century Oncology, 8931 Colonial Center Dr., Ste 100, Fort Myers, FL 33905. Tel: 239-936-0382 Fax: 239-936-1689. Board Certified: Radiology

**Mark Ondrako, MD** - received his medical degree at SUNY Upstate Medical University, Syracuse, NY in 2011. Dr. Ondrako completed a residency in Emergency Medicine at Allegheny General Hospital, Pittsburgh, PA from July 2011 - July 2014. Dr. Ondrako is in practice at LPG Emergency Physicians, 2776 Cleveland Ave., Fort Myers, FL 33901. Tel: 239-343-2606 Fax: 239-343-3695. Board Certified: Emergency Medicine

**Aastha Parsa, MD** – received her medical degree at All-India Institute of Medical Sciences, in 2003. Dr. Aastha Parsa completed an internship in Internal Medicine at Michigan State University, East Lansing, MI from July 2004 – June 2006 and a residency in Internal Medicine at Wayne State University, Detroit, MI from July 2005 – June 2008. She also completed a fellowship in Nephrology at John Hopkins university, Baltimore, MD from July 2008 – June 2010. Dr. Parsa is in practice at Associates in Nephrology, 7981 Gladiolus Dr., Fort Myers, FL 33908. Tel: 239-939-0999 Fax: 239-939-1070. Board Certified: Internal Medicine

**Venkata Parsa, MD** - received his medical degree from Institute of Medical Sciences, India from July 1995 - December 2000, graduating in February 2001. Dr. Parsa completed an internship and residency at Michigan University, East Lansing, MI from July 2002 – July 2005. Dr. Parsa also completed a fellowship at Wayne State University, Detroit, MI from July 2005 – June 2008. Dr. Parsa is in practice at LPG Medical Oncology, 8925 Colonial Center Dr., Ste 200, Fort Myers, FL 33905. Tel: 239-343-9567 Fax: 239-343-9571.

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## Membership – New Applicants

*Cont'd from page 4*

**Chritopher Ponder, MD** - received his medical degree from University of Texas Medical School, San Antonio TX in May, 2013. Dr. Ponder completed a residency in Emergency Medicine from the Orlando Health, in Orlando, FL from July 2013 - June 2016. Dr. Ponder is practice at LPG Emergency Physicians, 2776 Cleveland Ave. Fort Myers, FL 33901. Tel: 239-343-2606 Fax: 239-343-3695. Board Certified: Emergency Medicine

**Marc Rosenblatt, DO** - received his Osteopathic Medicine degree at Des Moines University College of Osteopathic Medicine in 1980. Dr. Rosenblatt completed an internship in Transitional Year at Union Hospital, Union, NJ from June 1980 - June 1981, and a residency in Neurology/Physical Medicine and Rehabilitation at Columbia University, New York, NY from July 1981 - July 1984. Dr. Rosenblatt is in practice at LPG Family Medicine, 8960 Colonial Center Dr., Ste 210, Fort Myers, FL 33905. Tel: 239-343-9469 Fax: 239-343-9498. Board Certified: Physical Medicine & Rehab., Family Practice

**Aneeta Samuel, MD** - received her medical degree at New York Medical College, NY in 2006. Dr. Samuel completed an internship at MS Ramaiah Medical College, Bronx NY from July 2003 - June 2006. Dr. Samuel is in practice at LPG Hospitalists Group, 636 Del Prado Blvd., S, Cape Coral, FL 33990. Tel: 239-343-2606 Fax: 239-343-3695. Board Certified: Internal Medicine

**Bozana Sijercic, MD** - received her medical degree at The Banja Luka University School of Medicine, Bosnia in 1991. She completed a residency in Internal Medicine at Marshfield Clinic, St. Joseph Hospital, Marshfield, WI from June 2004 - June 2007. Dr. Sijercic is in practice at LPG Bass Road, 16271 Bass Road, Fort Myers, FL 33908. Tel: 239-343-7100 Fax: 239-343-7190. Board Certified: Internal Medicine

**Clifford Thacker, MD** - Received his medical degree at St. Louis University, St. Louis, MO in 1989. Dr. Thacker completed an internship and residency in Obstetrics and Gynecology at Naval Hospital San Diego, San Diego, CA from 1985 - 1990. He also completed a fellowship in Addiction Medicine at the University of Florida, Gainesville, FL from Nov. 2017 - Oct. 2018. Dr. Thacker is in practice at Lee Health Recovery Medicine, 12550 New Brittany Blvd., Ste 201, Fort Myers, FL 33907. Tel: 239-343-9122 Fax: 239-343-9188. Board Certified: Obstetrics and Gynecology

**John Thompson, DO** - received his medical degree at Lake Erie College of Osteopathic Medicine, Bradenton, FL in 2013. Dr. Thompson completed an internship at Rowan University, Glassboro, NJ from June 2013-June 2014, and

a residency at Memorial Hospital, York, PA in Orthopedic Surgery from July 2014-June 2017. He also completed a fellowship at Rubin Institute for Advanced Orthopedics at Sanaï Hospital, Baltimore, MD in Adult Reconstruction Fellow from August 2016-July 2019. Dr. Thompson is in practice at Advanced Orthopedics & Sports Medicine of SWFL, 8710 College Parkway, Fort Myers, FL 33919. Tel: 239-482-8788 Fax: 239-482-6019. Board Eligible:

**David Weinberg, MD** - received his medical degree at Northwestern University, Chicago, IL in 2013. Dr. Weinberg completed a residency in Emergency Medicine at University of Pittsburgh Medical Center, Pittsburg, PA from 2013 - 2016. Dr. Weinberg is in practice at LMHS Emergency Physicians, 2776 Cleveland Ave. Fort Myers, FL 33901. Tel: 239-343-2606 Fax: 239-343-3695. Board Certified: Emergency Medicine

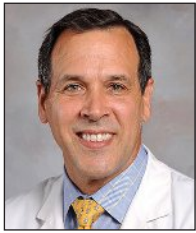
**Warren Wilkes, MD** - received his medical degree from Queen's University, Kingston, Ontario, Canada from 1990 - 1994. Dr. Wilkes completed a residency in Internal Medicine at Loyola University, Chicago, IL from 1994 - 1997. He completed a fellowship in Pulmonary at Loyola University, Chicago, IL from 1997 - 2000. Dr. Wilkes is in practice at LPG Pulmonary, 13340 Metro Pkwy., Ste 400, Fort Myer, FL 33966. Tel: 239-343-1105 Fax: 239-343-1155. Board Certified: Pulmonary

**Allison Yee, MD** - received her medical degree at Indiana University, Indianapolis, IN in 2006. Dr. Yee completed an internship in Transitional Medicine at St. Vincent's Hospital, Indianapolis, IN from July 2006 - June 2007. She completed a residency in Ophthalmology at university of Indiana, Indianapolis, IN from July 2007 - June 2010, and a fellowship in Oculoplastic Surgery at Indiana University, Indianapolis, from July 2010 - June 2012. Dr. Yee is in practice at Eye Centers of Florida, 4101 Evans Ave., Fort Myers, FL 33901. Tel: 239-393-2778 Fax: 239-936-8776. Board Certified: Ophthalmology

**Remone Yousif, MD** - received his medical degree at Ross University School of Medicine, Dominica in 2008. Dr. Yousif completed an internship in Surgery at Beth Israel Medical Center and a residency in Anesthesiology at Suny Upstate New York, Syracuse, NY from July 2008 - June 2012. He also completed a fellowship Pain Medicine at Suny Upstate New York, Syracuse, NY from July 2012 - June 2013. Dr. Yousif is in practice at LPG Pain Management, 16281 Bass Road, Ste 300, Fort Myers, FL 33908. Tel: 239-343-7110 Fax: 239-343-3650. Board Certified: Anesthesiology

# PRESIDENT'S MESSAGE

By DANIEL DE LA TORRE M.D.



## Hope versus experience

The recent commemoration of the battle of Normandy reminds us of the magnificent resilience of humankind in the face of dire adversity. Even a casual observer will note that among the many inherent contradictions in human nature is our ability to confront

challenges, defeat adversity, and then subsequently defeat ourselves. A good example is the new measles epidemic of which I wrote recently. An old enemy we once vanquished has returned at our own request. Such a scenario threatens to play out again.

HIV is a relatively new human threat, but one which quickly developed into a worldwide crisis. So dreadful was its toll that it inspired a momentous counterattack. Today, although no longer a certain death sentence, it remains a chronic incurable disease, and endemic in parts of the world.

Florida is one of the leading states for newly diagnosed HIV. Per 2017 CDC Statistics:

Florida was the state with the highest absolute number of new cases of HIV in the country (4,783) surpassing California (4,495), Texas (4,358) and New York (2,768).

Florida was third in the country for the number of people living with advanced HIV disease (136,876).

Florida had 3 of the top 10 cities in the country for new infections: #1 Miami-Fort Lauderdale-West Palm Beach, #2 Orlando, #7 Jacksonville Cape Coral-Fort Myers ranked 49th in the country for new infections (per capita). For comparison, Chicago ranked 45th.

Recent developments offer hope that the tide is turning in our favor. In February, HHS secretary Alex Azar announced the launch of a campaign to end the spread of HIV. The ambitious "Getting to Zero" campaign seeks to reduce new diagnoses of HIV in the US to zero by 2030, and by 75% within five years.

This plan was made feasible by a chain of relatively recent developments. In 2004, drug maker Gilead Sciences launched Truvada; a reverse transcriptase inhibitor for the treatment of HIV which combines emtricitabine and tenofovir. It went on to become a blockbuster drug, and was placed on the World Health Organization's List of Essential Medicines <[https://en.m.wikipedia.org/wiki/World\\_Health\\_Organization%27s\\_List\\_of\\_Essential\\_Medicines](https://en.m.wikipedia.org/wiki/World_Health_Organization%27s_List_of_Essential_Medicines)>, a listing of the most effective and safe medicines needed in a health system.

Since then, the principle of pre-exposure prophylaxis, or PrEP, has gained momentum. In 2012, the FDA approved Truvada for use in the prevention of HIV transmission in high risk populations. Estimates place that population at about one million Americans.

In May 2019, the Lancet published the results of the PARTNER study; showing that "...risk of HIV transmission in gay couples through condom-less sex when HIV viral load is suppressed is effectively zero." Stated another way; U = U, undetectable is untransmissible. If we can get the high risk population to accept PrEP, we can essentially eliminate new HIV infections. Patients who get tested and get treated effectively do NOT transmit HIV even if they have unprotected sex. This is the strongest argument for universal testing to stop the spread of the virus.

Still, it was noted that only about 20% of the estimated million

Americans most at risk for contracting HIV were taking PrEP. Cost was felt to be a major factor, as the wholesale price of Truvada in the US is a steep \$1,415.00 per month (note, the wholesale cost in developing countries is about \$7 per month). The most recent development is a deal reached between Gilead, the maker of Truvada, and the FDA under which the drugmaker will donate enough medication to treat 200,000 low income patients for up to 11 years.

While there remain some questions of access, it appears we now have the tools to do with HIV what we did with measles: suppress it into near extinction. The catch is that while we have 3 powerful tools to end the epidemic, the afflicted must be the ones wielding those tools. They must: 1) get tested (a disproportionate number of new infections are from folks who do not know their status; 2) if you test positive, get treated so you do not transmit virus; and 3) PrEP for those not yet infected, but at high risk. Like measles, we have met the enemy and the enemy is us.

Numerous social factors have emerged that inhibit the wider adoption of this program. Officials now worry that the option of a pre-exposure prophylaxis will promote false confidence leading to risky behavior that will increase transmission of other STDs. As such, Truvada has attained the status of a "party drug" in some circles. Within the gay community, a stigma has emerged; those who use PrEP to justify risky behavior risk being labeled "Truvada whores". IV drug users, also at high risk of contracting HIV, remain distrustful and tend to shun medical services.

So where can we expect to be in 10 years? The intensity with which we have joined this battle is encouraging, but in the background is the understanding that we are to some degree battling our own nature. While strong health systems are indispensable in this fight, it is only through the efforts of dedicated medical practitioners slogging it out in the trenches that any chance of victory exists. Experience shows us that humans are complex and often self-destructive creatures, and only a fundamentally human approach has any chance of success.

### A Word About PrEP Services:

Assuming patients are willing to comply (never a safe bet), primary care providers should be screening for HIV, assessing risk factors, and referring patients where appropriate. Unfortunately, many of those providers feel ill equipped to do so. They are encouraged to reach out for support services. In Fort Myers, various agencies including the health department and the residency program provide those services, free of cost for those who can't afford them. At Lee Memorial Hospital, the PrEP clinic is run by FSU residency program with ID oversight. Patients are referred by their PCPs and the service is limited to PrEP (they will not be re-referred for general medical care or treatment of HIV). The contact number below is for providers only (back-line).

- FSU PrEP Clinic
  - Friday mornings
  - Lee Downtown Campus
- 2780 Cleveland Ave  
Medical Office Complex, Suite 709  
Fort Myers, FL 33901  
Office: 239-343-2376 (Option #2)  
Referral FAX: 239-343-2301

## What benefits does the Society bring to Employed Physicians?

At the most recent AMA meeting in Chicago, I was in a meeting with 10 other County CEO's from across the country. One of the main topics was: how does a County Society provide a benefit to employed physician members? To answer this, we must look back at the history of the Society for just a moment.

About 20-30 years ago, the Society was a strong support for independent physician offices. It was a wealth of information, contacts and referrals for those "hanging their shingle". There was no question of what benefits the Society gave to its members. These past 10 or so years, we know that the business culture has shifted to large groups and physicians becoming employed instead of independent.

So why be part of the Society when, as an employed physician, I have the benefits I need? Because we have a Physician Wellness Program (PWP). The Physician Wellness Program is the one thing that all physicians can take advantage of regardless of where they work and no one in their work environment or in the Society will know. I attribute the Society and the Physician Wellness Program as neutral ground or Switzerland. Companies might have their Employee Assistance Programs, but someone, somewhere in the company is going to know who attended. With the PWP no employer or Society staff is involved, making it highly confidential.

Now you might say, I am not bad off enough to see a psychologist. I don't need to remind you that life can be tough. As physicians you see death and diseases of your patients around you. You handle the same life problems as your patients with tough job environments, family stress, financial challenges, health issues and so forth. The PWP is that avenue to be able to speak to someone and get out

those thoughts and fears out that become stumbling blocks in life. It gives you tips on how to manage stress, a tough work environment or a life event.



As a LCMS member please take advantage of the Physician Wellness Program. You can choose from either of these two groups and call them directly to arrange 8 sessions per year.

**The Center for Psychology**, 12499 Brantley Commons Court,  
Suite 101, Fort Myers, FL 33907

Private Line for LCMS Members: **239-208-3984**

Hours of Operation: Monday - Friday ~ 8:00 a.m. - 8:00 p.m.

After hours appointments may be available.

Naples office by appointment only.

<http://www.ctrpsych.com>

**Associates In Family Psychology**, 13430 Parker Commons  
Blvd. Ste 101, Fort Myers, Florida 33912

OFFICE: **239-561-9955**

Hours of Operation: Monday- Friday ~ 8:30am - 9:00pm

Evenings and Saturdays may be available.

<http://www.fampsynd.com>



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life's difficulties?***

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website at:**

**[www.lcmsfl.org](http://www.lcmsfl.org)**





# LOCAL PHYSICIANS SERVE AS “DOCTOR OF THE DAY” IN TALLAHASSEE

BY REBEKAH BERNARD, M.D.



This legislative session, local physicians Christy Cavanaugh, MD, Jaime Hall, MD, and Rebekah Bernard, MD served as “Doctor of the Day” in the state’s capitol.

The Doctor of the Day program was founded in the 1960s by Florida House Representative Walter Sackett, MD from Miami. For decades, Senators and Representatives have sponsored local physicians to serve at the capital during the legislative

session, allowing doctors an up-close-and personal view of lawmakers at work.

Doctors who serve during this program agree to provide medical care to patients of the Legislative Clinic throughout the day. The clinic is administered by Registered Nurses, and physicians are asked to evaluate patients that walk-in for care throughout the day. Any person at the Capitol building with an urgent medical need—whether they are a legislator, legislative aide, security guard, or visitor—may seek care at the clinic.

When not seeing patients, physicians are permitted to enter the House or Senate floor and watch the proceedings. “It is a great privilege to be one of only two non-legislators allowed on the floor during session—the only other non-legislator is the chaplain,” says Christy Cavanaugh, MD, a Family Physician and faculty member at the Lee Health/ FSU Residency Program in Fort Myers. Dr. Cavanaugh served on April 1, 2019, along with Family Medicine Resident Physician Jaime Hall, MD.



While physicians are not permitted to lobby lawmakers while serving as Doctor of the Day, the program offers a vital opportunity to talk with legislators one-on-one. What’s more, doctors may have the chance to show their medical training in action, as legislators and their aides often seek medical care for themselves at the Legislative Clinic.



“When I was Doctor of the Day a few years ago, a Senator came in with an asthma attack,” says Rebekah Bernard MD, a Family Physician in Estero, Florida. “I was able to treat him with nebulized albuterol and get him back to the floor. It was gratifying to be able to demonstrate first-hand the importance of physician training to a legislator.”

Dr. Bernard served this year as Doctor of the Day on April 30, sponsored by Representative Heather Fitzenhagen. “This program allows doctors to really get to know not only their own personal Representatives, but other members on the floor.”

Dr. Jamie Hall notes that Doctor of the Day provides a good opportunity for physicians to gain insight into the inner workings of the legislative processes. “It helps to understand the attitudes and arguments surrounding the issues we care about most.”

Dr. Cavanaugh points out that serving as Doctor of the Day is a great way to not only build relationships with our legislators, but to also share our patients’ stories. “I don’t have to be an expert at politics, but I can be impactful by sharing my skills and just being a good physician.”

For more information about serving as Doctor of the Day for the 2020 session, contact your county or specialty medical society, or reach out directly to the Office of Legislative Services at (850) 717-0301.

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# DRUG PRICES MUST BE IN TV ADS UNDER CMS FINAL RULE

BY ROBERT KING

The CMS on Wednesday finalized a rule that forces drug manufacturers to provide the list price for their products in direct-to-consumer ads, a policy aimed at increasing transparency and vehemently opposed by industry.

The new policy will apply to drugs or biologics with list prices greater than \$35 for a month's supply or the normal course of therapy, which HHS Secretary Azar said is what consumers would be accustomed to pay because it's close to an insurance plan's average copay for these drugs.

Azar shot back at pharmaceutical industry claims that the rule would confuse consumers because the list price isn't what they pay due to discounts and rebates.

"Claiming list prices don't matter is almost the same as claiming there is no problem with high drug costs at all," Azar said during a call with reporters on the rule.

Drugmakers will need to more than place a link to pricing information in the ad. The leading

pharma lobbying group Pharmaceutical Research and Manufacturers of America had called for its members to add a link to more information as a way to circumvent the need for federal regulation.

"They put \$4 billion a year into TV advertising," Azar said of drug companies. "To point [consumers] to the internet is the equivalent to saying they should put their ads on the Internet and not on TV."

Drug companies also can add a line that insurance could change the price a consumer pays.

PhRMA President Steve Uhl bashed the rule during an Atlantic event in Washington Wednesday, touting instead the association's voluntary program to add a link in ads.

"Rather than a government mandate to cram this information into an already cluttered ad, we believe patients should have this information along with comprehensive information," Uhl said.

*"They put \$4 billion a year into TV advertising," Azar said of drug companies.*

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The CMS is relying on drug companies to effectively regulate each other, a break from how DTC ads are currently regulated.

The Food and Drug Administration already regulates direct-to-consumer ads and cracks down on companies that fail to list the side effects among other violations. However, HHS decided not to send the rule through FDA but rather through the CMS due to legal reasons.

"We decided that our authority with the Social Security Act with Medicare and Medicaid provided the strongest platform and enforcement with the Lanham Act rather than having FDA inject itself into list pricing considerations," Azar said.

The Lanham Act is a law that governs trademarks and copyrights. It also allows competitors to sue one another for making false statements in an ad.

"There are very large legal practices built on pharma companies suing each other," Azar said.

He added that the rule, first proposed in October and going into effect in 60 days, will also require drug companies to say that insurance may change the price.

The secretary brushed off a question about whether the rule violates First Amendment rights for drug companies, noting that car dealers are required to post the sticker price for their cars.



## ENHANCE YOUR LEADERSHIP SKILLS AND CAREER

By LARRY ANTONUCCI, MD, CEO of LEE HEALTH

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From left: Nina Burt, O.D.; Sarah Eccles-Brown, M.D.; E. Trevor Elmquist, D.O.; Kate Wagner, O.D.

# TAKING MENTAL HEALTH DAYS AND HOW TO MANAGE THEM

BY [WWW.TALKROUTE.COM](http://WWW.TALKROUTE.COM)

There are days when your mind is so cluttered and overwhelmed that you wake up for the day's work, and you're not sure if you can even handle it. That is one of those times when you need to take a day for yourself to restore and preserve your own mental health. This isn't a gimmick, and it's not something that people make up to get out of work—it's a genuine issue with which all of us need to be concerned.

To look at this properly and deal with it appropriately, you have to, first, gain a better understanding of where it comes from. Then, you'll be able to decide for yourself when you need a mental health day, and how is the best way to manage them as it applies to your own professional and personal life.

## **Mental Health vs. Mental Illness**

The first thing we'll look at is what this really is because it tends to be viewed by some professionals as a joke or some kind of novelty. For some reason, many people don't take this seriously at all, so it's important to clarify what is meant by, "mental health day" and its significance.

A crucial distinction to make is to never confuse mental health with mental illness, which is an entirely separate area. This might be the primary reason why a person can sometimes be incorrectly stigmatized as having more serious mental or emotional issues, when that person simply says that they need a mental health day.

A person's mental health refers to their well-being, psychologically and emotionally, which is something that every one of us contends with every day as we manage our lives and adapt to life's daily struggles and responsibilities. Mental health basically describes the mental and emotional state of every individual. Mental illness is different.

If you have a mental illness, it means you have a psychological condition or disorder that disrupts your life and requires treatment. This can be anything from serious depression to personality disorders, and everything in-between. So, you can see why it's important to distinguish between mental health and mental illness, to avoid branding someone with a serious illness when they just need some time to de-stress and balance their mood.

## **What is a Mental Health Day?**

If you say you're taking a mental health day, what do you mean by that? As we touched on already, the gist of it is that you are having a harder time than usual handling the strain of accomplishing everything that's required of you, and though this can definitely include responsibilities outside of work, it mainly has to do with what you need to complete at work.

To simplify this further, taking a mental health day means that you're going to take a day off work to focus on balancing yourself again, psychologically and emotionally.

The whole point of it is to stop. Sometimes you need to just stop what you're doing so that you can hear yourself think because the stress only continues to increase unless you stop what's stressing you.

A mental health day doesn't have to be a day of inactivity, though. Not only can you do things that will help you to relax and recenter yourself, such as meditation or exercise, but it's also an opportunity to assess everything you're doing at work. You can come up with new strategies for managing all of your projects, look at your schedule for tasks and see what might need to be changed, and even figure out how to relieve some of your workload if necessary.

Just like vacation days, sick days, and personal days all have a specific purpose, mental health days have their own purpose, too. In fact, a mental health day is kind of a personal day in its own way. They unfortunately aren't recognized as an official reason for an absence, despite the clear need for them by business owners, as well as any employee. So, a mental health day is a day that you take off from work to either avoid becoming overly strained mentally and emotionally, or because you've already reached that point and need to take it back a notch to balance yourself.

## **Don't Write It Off as Illegitimate**

Your first instinct, if you've never heard of mental health days, may be to assume that it's not a genuine concern, but they can be all too necessary, especially when you're running a business. Just because it's not a time-off allowance that is typically included in company policies, that doesn't mean it doesn't have real value. And just because you have never considered taking one doesn't mean that you don't need one.

Many employees of a company don't have the benefit of excused absences, but as the owner of your business, you can decide for yourself when you need a mental health day. You're the boss. If this article is inspiring you to take more care with managing your mental health, then you have the option of taking that time if you need it.

Of course, you most likely don't feel like you can justify taking the time away from your business. As you're probably a very driven, hard-working person, you probably don't allow yourself an absence from work for something like this; but it can help you immensely with relieving stress so that you can get back to work, full-force, and increase your productivity as you become mentally balanced.

Don't write off mental health days as something trivial or unnecessary just because of how it sounds. When you're struggling to get through all of the various tasks for which you're responsible every day, letting it drain your energy and stress you out, a mental health day might be exactly what the doctor ordered.

*Cont'd on page 13*



# TAKING MENTAL HEALTH DAYS AND HOW TO MANAGE THEM

BY [WWW.TALKROUTE.COM](http://WWW.TALKROUTE.COM)

*Cont'd from page 12*

## **Know When to Take a Day Off**

Obviously, it's not something you can do all the time, and if you feel that you frequently need to take a day, then it's probably something you need to address more deeply. Remember that if you don't take care of yourself, you aren't going to be able to do your job very well, anyway. One particular example of an instance when you might need to take a day for yourself is the following.

During periods when there is an unusually heavy workload, you may wake up feeling instantly panicked about everything you need to get done. It probably doesn't mean that you have some serious mental health condition; it most likely just means that you're overworking yourself and need to take a step back from work for a moment. That's a time when you should communicate with your team and have them pitch in to help you with the load, so that you can take a little time to relax for the day to catch your breath and get your balance.

When you have a business, or even multiple businesses to run, it's understandable that you don't want to let anything slip, but when you don't pay attention to your mental health or manage your mood, that's a fast-track to getting burned out. Any time you feel so overwhelmed that it's a struggle to get through work every day, that's when you might need a mental health day.

## **What Can a Mental Health Day Do for You?**

Now that we've established what a mental health day is, and the value of taking one to restore your psychological and emotional state, let's look at the actual benefits of it. First of all, as we touched on earlier, this is one of the most effective ways to reduce your stress level.

There are a lot of things you can do to reduce stress, many of which can be done while you keep working; however, when you reach that point where you can no longer effectively complete tasks because you're becoming overwhelmed, that's when you need to stop and regroup. As an ambitious entrepreneur, stopping completely, even for a short time, is one of the hardest things for you to do.

Even so, it should probably be your first step when you reach that point. The next benefit that results from taking a mental health day is that it can get you back to being fully productive. It does you no good to continue every day as you normally do, under extreme strain from which you give yourself no relief, and performing at a diminished capacity because of it.

To regenerate and restore yourself to full operating capacity, you have to take some time away from the things that are causing that strain and rethink your strategy for getting everything done. Take the opportunity to reorganize the

workload and change whatever needs to be changed, in such a way that it doesn't cause you to become overwhelmed.

Finally, after reassessing everything and regrouping during a mental health day, you will find that your tasks feel easier when you come back because your mind and body have both had a chance to restore themselves. Instead of struggling and fighting through projects, you'll be able to get through them faster, with more ease, and possibly even enjoy them. Imagine enjoying running your business again!

Intense strain at work on a regular basis can eventually lead to all kinds of negative mental health issues, like depression, burnout, and other problems, which is why mental health days can be of huge benefit to you as a business owner.

## **Mental Health & Burnout**

As we have been discussing understanding and dealing with burnout in this series, we've looked deeply into what causes burnout, how to avoid it, and how to handle it when it happens to you. This conversation is so important because it's not talked about enough, and many business owners don't even realize when it is already happening. Furthermore, mental health is one of the most significant contributing factors to burnout.

When you don't take measures to maintain positive mental health as a business owner, something has to give at some point; it's infinitely better to avoid burnout by using healthy practices to prevent it. One of these very healthy practices are mental health days. If you find that you really need one every now and then, don't feel guilty about taking it. It's vital for you to take that time to restore your energy so that you can stay productive and keep yourself from getting burned out. Again, it's worth reiterating that mental health is something that we all need to be concerned about in our daily lives, and it in no way means that you have a mental illness, or that you're inferior to other people.

You should take care of your mental health just as carefully as you take care of your physical health. In the same way that we suffer consequences when we overwork and strain ourselves physically, you can also harm yourself if you neglect your mental health. Just as you need rest for your body after you've been intensely exerting yourself, taking time to let your mind recover during high-stress periods is also needful.

No one can force you to take a step back from work so that you can regroup. You have to monitor your own mental health and watch the signs in yourself, so that you will know when it may be time to stop to restore your psychological and emotional state. You're not giving up, and you haven't failed when you reach that point. You should never feel guilty about taking a brief rest because we all need it sometimes. Take a mental health day. It might be exactly what you need.

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# CALUSA WATERKEEPER HOLDS PUBLIC HEALTH TOWN HALL

By K.C. SCHULBERG, EXECUTIVE DIRECTOR / CALUSA WATERKEEPER



## Hall Event features world premiere of documentary "TROUBLED WATERS"

Calusa Waterkeeper invites all medical professionals to the Public Health Alert - Florida Water Summit on Monday, August 5, from 5:30 to 9 p.m. at Broadway Palm Dinner Theatre. Physicians, nurses and medical staff will learn vital information to help them address patient concerns and symptoms related to toxic Harmful Algal Bloom exposure. The cost to attend is \$20 and includes a buffet dinner, debut of the original documentary film "Troubled Waters," and Q&A with top medical and scientific experts.

The summer of 2018 brought catastrophic harm to the shores of South Florida, with devastating Harmful Algal Blooms that curtailed tourism, damaged our economy and caused massive fish kills and wildlife mortality. We have since learned that it's not just marine life being harmed by these algal blooms. Since 2018, groundbreaking evidence has linked these environmental toxins to potential inhalation contamination. Health threats from Harmful Algal Blooms may be much worse than originally surmised, increasing the urgency to communicate with the public. Armed with a grant

from the Southwest Florida Community Foundation, Calusa Waterkeeper has ramped up its education and advocacy on this public health issue.

On August 5, panelists will generate discussion, share state-of-the art data on Harmful Algal Bloom-related health threats, and engage with healthcare providers to disseminate findings to the medical community and public at large. Panelists were selected from our team of world-renowned experts: neurologist Dr. Walter Bradley, marine biologist Dr. Larry Brand, epidemiologist Adam Schaefer, research Ph.D. Dr. James Metcalf, neurologist Dr. David Davis, marine science professor Dr. Mike Parsons, neurologist Dr. Elijah Stommel, Ph.D., clean water advocate Howard Simon, emergency room teaching professor Dr. Arthur Diskin, internal medicine practitioner Dr. Parisima Taeb, ENT-otolaryngologist Dr. Robert Zarranz, registered nurse Holley Rauen, and our Calusa Waterkeeper John Cassani.

Reserve your seat for the Public Health Alert-Florida Water Summit online at [calusawaterkeeper.org](http://calusawaterkeeper.org). For more information, contact Calusa Waterkeeper at 239-784-0880.

By K.C. Schulberg

*Executive Director / Calusa Waterkeeper*



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# AS I RECALL . . . FLORIDA STATE BOARD

BY ROGER SCOTT, M.D.

(Previously Published September 1997)

There are records dating back to 1828 of Florida medical licenses, but the first true Medical Practice Act was enacted in 1921. From that time forth it was under this act (with updates) that the Florida State Board exams were given June 24-26, 1951, neither Florida nor California had license reciprocity with any of the remaining 46 states and so taking the Florida exam was a must for me.

It was first necessary to pass the FL Basic Science Exam (fee \$25) and be a US Citizen. An application to the Board of Medical Examiners (fee \$25) required birthplace and date, grammar, high schools, pre-med college, and medical school. A picture and physical description was necessary and all of this had to be with certified recommendations from two physicians, ideally in the state of Florida. The exam was given at the Seminole Hotel in Jacksonville on June 24 – 26, 1951. The evening before the exam began, each applicant had to bring his (and a few hers) actual diploma and approach the Board when called. On presenting my credentials, Dr. Homer Pearson (a family friend) of Miami said in a very loud voice “Scott, why in the hell are you taking this exam?” I was not sure whether my response should be one of joy or doom.

As you may be aware, getting a license here in those days was extremely difficult. The most likely individual to obtain a license was native-born, white, and male with a current Florida address. In addition, advance notification to the Board by a community in need of your services was significantly helpful in securing a license.

The examinations were written in English and essay type embracing subjects of: APPLIED ANATOMY; HYGIENE; SURGERY; GYNECOLOGY; OBSTETRICS; MEDICAL JURISPRUDENCE; THERAPEUTICS; SURGICAL PATHOLOGY; DIAGNOSIS; AND THE PRACTICE OF MEDICINE. It was necessary to obtain a grade of 75% and “no credits are given for years of practice and no papers will be reviewed by an examiner after the secretary’s (Dr. Pearson) report”. In other words, there was no appeal if you failed.

In my usual pack-rat manner, I kept six of the

question sheets. The questions were very simple in many instances but somewhat bizarre in other instances and could be interpreted in varying ways. Sample questions are: “Discuss psychogenic factors in surgery. Give an acceptable treatment and dosage for infestation with hookworms, roundworms, tapeworms, and pinworms. (Please note that all of these parasitic infestations were common in Florida



in 1951.) Give some of the acute effects and mechanisms of action of curare and nicotine. What is your idea of a trial labor and when is such indicated? Name three most common urinary complications of pelvic surgery and procedures that tend to minimize these complications. Name the three main forms of leukemia, giving the distinguishing feature in the blood picture of each. Discuss briefly the etiology, transmission, symptoms, signs, and important laboratory data in endemic Typhus fever. Discuss briefly the signs, symptoms, and laboratory findings in a patient with sickle cell disease “in crisis.” All questions are essay and vary from 5 to 12 in each of the twelve sections with 2 hours allowed for each section.

Approximately two months following the exam one would receive a license or a failing notice. I feel very fortunate in having been licensed in Florida, on 25th August 1951, the same year as Elizabeth A. Brungard from LaBelle, Florida (her father, Dr. Otis E. Brungard, had the #3 Florida

State Board Medical License issued 15th August 1931, which we have in our museum). I have discussed with my compatriots of that era the exams and they agree that my thoughts are in order.

I wonder if I would have been allowed to practice in Florida had I not been a native; however, here I am with intelligence or happenstance of being a native. Bet you thought you caught me when I said 48 was the number of states. Alaska #49 and Hawaii #50 joined the union in 1959!

I challenge you to take this exam and see if you are able to pass it.

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