Let us Listen

Life is complicated before being faced with healthcare decisions. Let Kindred help. Call 1.866.KINDRED (1.866.546.3733) and speak to a Registered Nurse to help answer your questions. Whether it’s finding the right Kindred care setting, understanding insurance or Medicare coverage, or evaluating your options – let us help you find a solution. No question is too big or too small.

Ever since mom fell it’s been doctor after doctor and form after form. At this point we don’t even know who to listen to anymore.

Making your life a little easier is just one more way that Kindred continues the care.

1.866.KINDRED

CONTINUE THE CARE
kindredanswers.com

In the Las Vegas area, Kindred offers services in: 3 Transitional Care Hospitals • Subacute and Transitional Care Unit • Outpatient Wound Clinic • Home Health • Hospice Care • Personal Home Care Assistance • RehabCare Contract Rehabilitation
TMLT offers more than just the basics.
Our policies keep up with the emerging risks in health care.

**CYBER LIABILITY**
Individual physician and entity policies include Cyber Liability coverage designed for data breaches and privacy exposures faced by medical professionals that can result from lost laptops; theft of hardware or data; improper disposal of medical records; hacking or virus attacks; and rogue employees.

The Cyber Liability endorsement includes:
- network security and privacy coverage;
- multimedia liability coverage;
- coverage for privacy breach response costs, patient notification expenses, and patient support and credit monitoring expenses;
- network asset protection;
- cyber extortion coverage; and
- cyber terrorism coverage.

**CYBER LIABILITY POLICY LIMITS**
- $100,000 per claim and $100,000 aggregate per policy period upon renewal.
- Physician Entity: $100,000 per claim and $500,000 aggregate per policy period upon renewal.

*Increased limits are available for purchase.

FOR MORE INFORMATION
CALL A TMLT UNDERWRITER AT 800-580-8658 OR VISIT WWW.TMLT.ORG
The Center for Cancer and Blood Disorders

SOARING WITH NATIONAL AND STATEWIDE HONORS

RECOGNIZED - NCQA
National Committee for Quality Assurance Excellence in Care Management

CERTIFIED - QOPI
American Society of Clinical Oncology Quality Oncology Practice Initiative

DISTINGUISHED - SCRI
Sarah Cannon Research Institute

Patient support services provided by Careity Foundation

The Center for Cancer & Blood Disorders thecenterfx.com

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Middle row: Michael Ross, M.D., Carlos Hernandez, M.D., Henry Xiong, M.D., Ph.D., A. Seyi Ojo, M.D., Greg Friess, D.O.

Front row: Gary Young, M.D., Vinaya Potluri, M.D., DeEtte Vasques, D.O., Prasadthi Ganessa, M.D., Ana-Margaret Ochs, D.O., Shaden Mansoor, M.D., Robyn Young, M.D.
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Time Tested Craftsmanship, Timeless Design.

Whether building a new home or renovating your present home, master builders Ron and Fred Parker, owners of the Fred Parker Company offer creative design and techniques, plus the ultimate in quality construction. They are devoted to their clients and to building and remodeling homes that create an environment that reflects the way they want to live.

The Fred Parker Company is consistent in its dedication to providing outstanding customer service and customer satisfaction. They have been recognized as trend setters and pioneers and have received some of the most coveted awards in the homebuilding industry.

The company is a family business, and has been building and remodeling homes in the metroplex for many years. They know that quality is a way of life, not just a goal.
Doctors are busy. I can’t think of a single practicing physician among my friends who is not busy. However, despite the demands of our daily practices, I know beyond doubt that it is critical for us to be engaged in the political process. It does not take more than a few seconds of contemplation to realize the degree to which legislation controls our ability to care for patients.

I have led the Tarrant County Medical Society’s Medical Legislation Committee for a few years now, and through that position have learned two things:

1. There are many opportunities for doctors to have influence regarding legislation affecting the practice of medicine.
2. A tiny fraction of physicians in Texas (and in Tarrant County) are actively involved in the process.

Since most of my physician friends use “I don’t have time” as their excuse for lack of involvement, I decided to create a list of opportunities to participate in legislative activities, ranked in order by the amount of time required, from least to most. I am realistic enough to understand that I can’t convince everyone to do everything on this list. However, I hope each of you reading this article will agree that each of us can (and should) do at least one thing from this list.

1. JOIN TEXPAC (5-20 minutes, once per year)

This, in my humble opinion, is a no-brainer. Every TMA member in Tarrant County should be a member of TEXPAC.

Every Single Member. 100%.

TEXPAC is the political action committee of the TMA. Your TMA dues do not fund the activities of TEXPAC. No matter how busy you are, you have time to write a check, or apply online with a credit card, to support an organization that has the experience and expertise to identify and support candidates.
Why Texas Medicine Needs TEXPAC

It’s that time. We are in the midst of the 140 days every other year in Texas when politicians make speeches, lobbyists lobby, legislators pass laws, and organized medicine works hard to forge government changes that will help physicians and their patients.

Fortunately for medicine, TEXPAC was working hard long before the 140-day state legislative session began. TEXPAC paved the way for TMA’s lobby team and physician-advocates to rise above the commotion at the state Capitol with a sturdy voice and strong personal relationships in the House and Senate.

TEXPAC and TMA work hand in hand to achieve medicine’s goals at the local, state, and federal level. Each has an important role.

What Is the Difference Between TEXPAC and TMA?

In the government relations arena, TMA focuses on policy. TEXPAC is all about electing the right candidates, and educating candidates and elected officials about Texas medicine so they can make informed decisions. In addition, TEXPAC makes monetary contributions to election campaigns, whereas TMA does not. That is why your TMA membership does not automatically make you a member of TEXPAC.

TEXPAC operates under the motto, “United in protecting our patients.” TEXPAC’s 7,000 members advocate on behalf of TMA’s 48,000-and-counting Texas physicians and medical student members, and nearly 8,000 TMA Alliance members. TEXPAC is one of the largest nonpartisan PACs in the state and ranks first in size among other state medical association PACs.

TEXPAC is dues-funded. Where does the money go?

On the campaign trail, it goes to:

- Direct contributions to a TEXPAC-endorsed candidate’s campaign;
- In-kind support to candidates through mailers, push cards, and other promotional items;
- Polling to help better understand the dynamics of key races; and
- Assistance for physicians hosting events and fundraisers for their elected officials or candidates.

TEXPAC works to advance TMA’s mission of improving the health of all Texans and enables TMA members to protect Texas patients through political education and activism.

TEXPAC leaders encourage county medical societies to interview ALL local candidates running for office, then give TEXPAC their recommendation for endorsement. TEXPAC also encourages county societies to conduct letter-writing campaigns to the TEXPAC board in which physicians explain why they support the candidate they believe is the most qualified. These letters are invaluable to TEXPAC and help the board make the right endorsements.

What about candidates and officials who do not support TMA’s legislative agenda? TEXPAC encourages local physicians to meet with them and use their poor voting record as an opportunity to educate them on issues important to the doctors and patients they represent.

Your Voice Is Important, Too!

TEXPAC knows physicians have a voice; but unified, your voice is amplified and powerful. TEXPAC’s tools put you in the room with your legislators, where it counts most. While TMA has a robust representation of physicians who embody medicine as a whole in Texas, TEXPAC’s passionate members go the extra mile to make sure their practices are not attacked at the local, state, and federal level.

TEXPAC’s diverse board of physician leaders represents different geographical areas, practice types, and political philosophies. The board makes endorsement decisions by democratic vote to represent TEXPAC’s varied political membership. TEXPAC endorses candidates based on their public record of standing up for medicine’s issues, and a combination of subjective and objective scores, not by their party. With 59 Republicans and 55 Democrats endorsed in the Texas House during the 2014 election, it is clear the approach is not party-driven. TEXPAC does not endorse candidates simply because they are incumbents. The candidate must have a proven record of supporting medicine.

How Does TEXPAC Endorse Candidates?

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all TEXPAC board meetings

300 Club: $300/year, $25/month (Student/Resident $60)
Benefits of Basic Membership plus invitation to 300 Club receptions with elected officials

Capitol Club: $1,000/year, $84/month (Student/Resident $200)
Benefits of 300 Club, plus priority for delivering contributions to elected officials and candidates, Capitol Club winter jacket (if you join or rejoin between 2014 and 2015), and special recognition at TEXMED conference

Patron Club: $5,000/first year, $417/month ($2,500 every year continuously renewed)
Benefits of Capitol Club, plus Patron Club winter jacket, priority ranking for attendance at political events, free admission to any TEXPAC-hosted fundraiser, and annual Patron Club Dinner with an elected official

To join TEXPAC or renew your membership today, call (800) 880-1300 ext. 1361.

United in Protecting Our Patients

About TEXPAC
TEXPAC is a voluntary, nonpartisan branch of the Texas Medical Association. TEXPAC works to advance TMA’s mission of improving the health of all Texans while enabling its members to protect their patients through political education and activism.

TEXPAC membership is an investment to ensure medicine has a strong voice at the crowded table of politics and to hold elected officials accountable. TEXPAC provides physicians leadership opportunities to become involved proactively, and knowledgeable about health care political issues.

Why Join TEXPAC
Medicine is under attack from extremist political groups whose funding continues to grow so they can advance their political agenda. Now is the time to protect your patients and your practice from additional intrusion from the government and other third parties into your examine room. We must continue to support our friends of medicine currently in office and those running for office. We need them now more than ever before.

TEXPAC makes your voice heard at the Capitol.
Your contribution allows us to do our work so you can better focus on your work.

Join today.
Go to www.texpac.org or complete the membership form on the back.

TEXPAC
Join the Party of Medicine

- Patron Member: $5,000 first year; $2,500 every year thereafter/Physician and Spouse
- Capitol Club: $1,000/Physician and Spouse/Physician and Spouse; $200/Student or Resident
- 300 Club: $300; $60/Student or Resident
- Basic Physician: $125
- Resident $40
- Student $10
- Basic Alliance $55
- Resident Spouse $20
- Student Spouse $10

Name ____________________________
Occupation ______________________
Employer _________________________
Address __________________________
City/State/Zip _____________________
Phone __________________ Fax ______
Email ____________________________
Referred by ________________________

Signature __________________________

Easy Payment Options

- One-time payment
- Annually (select month ________________________)
- Quarterly (on the fifteenth of January, April, July and October)
- Monthly (on the fifteenth of every month)

I understand that TEXPAC will deduct my payments until I cancel my membership in writing.

Signature __________________________

Contact TEXPAC at PO Box 143027, Austin, TX 78714-9931, (800) 880-1300, fax (512) 370-1633.

Texas Medical Association Political Action Committee (TEXPAC) is a bi-partisan political action committee of TMA and affiliated with the American Medical Association Political Action Committee (AMPAC) for congressional contribution purposes only. Its goal is to support and elect pro-medicine candidates on both the federal and state level. Voluntary contributions by individuals to TEXPAC should be written on personal checks. Funds contributed to individuals or professional associations (PAs) that would exceed federal contribution limits will be placed in the TEXPAC statewide account to support non-federal political candidates. Contributions are not limited to the suggested amounts. TEXPAC will not favor or disadvantage anyone based on the amounts or failure to make contributions. Contributions used for federal purposes are subject to the prohibitions and limitations of the Federal Election Campaign Act. Contributions or gifts to TEXPAC are not deductible as charitable contributions or business expenses for federal income tax purposes. Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation, and name of employer of individuals whose contributions exceed $200 in a calendar year. To satisfy this regulation, please include your occupation and employer information in the space provided. Contributions from a practice business account must disclose the name of the practice and the allocation of contributions for each contributing owner. Should you have any questions, please call TEXPAC at (512) 370-1361.
UPCOMING ALLIANCE EVENTS AND VOLUNTEER OPPORTUNITIES

Watch for invitation cards in mail. RSVP to Ingrid Smith at xcel830@sbcglobal.net.

“JPS Shower of Love”
Friday, March 27, 2015
Trinity Terrace
Program and lunch

“Mary Helen Awards Luncheon
And Recognition of 50 years Members”
Friday, May 8, 2015
The Lillipad on Magnolia

IT’S TIME TO NOMINATE AN OUTSTANDING STAR!
The awards will be presented on Friday, May 8, 2015 at the Alliance Foundation Annual Meeting and Luncheon. For additional information, please call Kirstin Kunkel at 5kkunkel@gmail.com.

The FAMILY OF MEDICINE NEEDS YOU!
Join us for FIRST TUESDAYS AT THE CAPITAL. Contact Elizabeth McCurdy for more info at emccurdy@sbcglobal.net. March 3, April 7 and May 5.

DRAMA QUEENS
Contact Mary Ann Shelton to get on list at lactamring@aol.com. Carpool available! Dates to be determined a few weeks prior to show.

SHOWS THIS SPRING:
APRIL: Don’t Bother Me I Can’t Cope - Jubilee Theater
MAY: Urinetown - Theater Arlington

HARD HATS FOR LITTLE HEADS
Volunteers needed to fit and distribute bike helmets for underprivileged kids. Contact Orly Meyers to volunteer at orlymeyers@gmail.com.

NEXT EVENTS:
EARTH PARTY – City of Fort Worth
MARCH 28, 2015
Magnolia Green Park

AFRICAN AMERICAN HEALTH EXPO
SATURDAY APRIL 26, 2015

BOOK CLUB
Contact Sandy Lanier to get on mailing list at sandylanier@gmail.com.

• APRIL 2, 2015 12:30-3pm The Heretic’s Daughter by Kathleen Kent at The Stayton - 2501 Museum Way 76107 Lunch Provided by The Stayton. Reviewer: Jane Bruckner

• MAY 7, 2015 12-3pm Annual Luncheon and Book Pick at the home of Marilyn Bloemendal 6956 Laurel Valley 76132
The Alliance Foundation’s only fundraiser, the 6th Annual Medicine Ball, was held this year on February 7th at the Cendera Center in west Fort Worth.

Mardi Gras, New Orleans style, was the theme, and it proved to be a fantastical and spectacular gathering. Amy and Amber and the staff at Cendera went above and beyond to make the night incredibly special. While most of the near 400 guests were dressed in black tie, many chose to add Mardi Gras flair; purple, gold and green, including masks and beads, making it all the more eventful.

Sewell Lexus showcased two fabulous vehicles at the entrance as guests were welcomed by spirited jesters (our fun local medical students from UNT). The foyer and ballroom were amazingly decorated in old French Quarter style lampposts dripping with beads, as were the chandeliers, all thanks to Alliance member, Barbara Evans. She took on the task of decorating the venue with a personal interest and transformed the evening into a tasteful peek into the fun tradition of Fat Tuesday.

A raffle was held during the cocktail hour, which included 1) a grand selection of premium liquors, 2) a night on the town in Fort Worth, including a night at the Worthington, dinner at Del Frisco’s, the use of a Lexus LS 460 for the weekend with detailing of your own vehicle at Sewell Lexus, tickets to the Bass Hall and tickets to the Modern Museum of FW, and 3) the ever popular Texas Rangers tickets located directly behind home plate along with a parking pass, (donated by our own Dr. Art and Mrs. Barbara Garcia), a Yeti Cooler and several Yeti accessories. Alliance member Jennie Conrad of Conrad Creative transformed the raffle items into beautiful packages for viewing. A new and fun addition this year was the “Wine Toss”, where 60 bottles of wine were won; some that were donated by our own alliance members and many which were donated by King’s Liquor.

Dinner was served buffet style and highlighted the tastes of New Orleans, including Jambalaya, fork and knife “Po’ boys”, mini beignets with espresso, and southern style bread pudding. Guests raved over the food, which was provided by Kristen and her staff at Eurocater.

We brought back the popular photo booth with GreenScreen Imaging by Marc and Scot Sloter. They snapped pics all evening as guests posed in front of a festive choice of backdrops. The photos were then printed and given as party favors.

Archie’s Gardenland provided a beautiful, romantic outdoor garden inside a corner of the ballroom complete with wrought iron park benches and greenery in pots where couples could steal away while feeling as if they were at a city corner park right in the middle of downtown New Orleans.

Dancing began at 8:30 with Professor D, the ultimate entertainment band in DFW, and concluded at 11:30, as we sadly said goodnight, although not nearly ready.

All in all the event was very successful, bringing in a record profit, and allowing full funding of our community projects: Be-Wise---Immunize, local Allied Health Scholarships, Hard Hats for Little Heads and Project Access Tarrant County.

A very special thank you again to all of our Patrons, to our patient and incredible printer, MGM printing, to the businesses and individuals who donated goods, and all who made this evening possible.

See next month’s issue for photos of the event!
Coming from the third world country of Nepal, I had always desired a career through which I could have a positive impact directly upon people who live in such areas around the world. I was born in a rural village where even today the closest health clinic is miles away, with very few trained medical professionals. This is not some story you read in books, but it is a reality in so many parts of the world. I was reminded again of this harsh reality and the disparity in health care during my second year cardiology systems course at Texas College of Osteopathic Medicine.

We were learning about the pathologies of the heart, especially those related to infections causing permanent complications such as heart valve defects. The reality hit me. My brother was one such unlucky person to be born in the wrong place in the world. As a child in a third world country, one does not get essential medical attention and health awareness. There are no regular doctor visits or continuum care by a primary care physician, which is normal in developed countries. When he developed recurrent high fever and sore throat at a young age in Nepal, it was overlooked. My parents, like many others in Nepal, did not understand the severity of high fever. This is how his simple case of strep throat went undiagnosed. It was not until we moved to the United States and my brother had a physical examination at a local health county that one of the nurses noted of a heart murmur. After seeing a cardiologist, my brother was diagnosed with mitral regurgitation, most probably a complication from rheumatic fever that had gone undiagnosed and untreated.

As I read the passage over rheumatic fever...
and heart complications in
the Robbins and Cotran Pa-
thology book, I could not help
but think how unfair this situ-
ation was. Rheumatic fever is
rare in the United States, but it
is a common occurrence and a
leading cause of cardiovascu-
lar complications in develop-
ing countries. Had my brother
not been born in Nepal, his
case of strep throat would
have been easily treated with
a simple dose of antibiotics
and cardiac complications
would have been prevented.

Studying about diseases in
medical school is fascinating,
and as medical students, we
are intrigued by the intrica-
cies of the human body and
the modern technology used
to treat diseases that were
once life-threatening. Yet,
even with these advances,
we are not reaching out to
the parts of the world where
medical resources and health
awareness are crucial. What is
the point of our new discover-
ies and inventions if we can-
not utilize them to help those
who need it? Maybe if I were
not born in Nepal or if the ob-
vious repercussion of health
disparity had not hit so close
to me, I too would have been
blinded to these needs.

We hear of stories of so many
children dying from malnutri-
tion and succumbing to infec-
tions that can easily be pre-
vented through vaccinations.
This breaks my heart. It is still
ture that the majority of deaths
among children in the world
are from ailments that are pre-
ventable or treatable. I hope to
change this or help in my own
small way to create ripples
in this vast ocean of human-
ity. With the stresses of exams
and school, it is so easy to lose
focus of the large picture of
why we chose medicine in the
first place. I must stay opti-
mistic and humble toward the
opportunities I have gotten so
far while still remembering
that with these opportunities

come responsibilities toward
all those who need our help.
Having the knowledge and
the capabilities to make a pos-
itive impact on someone’s life
must be met with a desire to
utilize those capabilities to the
fullest potential. I could either
stay sad and defeated by the
harsh truth, or be optimistic
and strive to directly bring
positive change to such parts
around the world as a physi-
cian.

Bio:
Namisha Thapa is a second year
medical student at TCOM-UN-
THSC. She moved to the United
States from Nepal at the age of
13. She received two Bachelor’s
Degrees in Microbiology and
Biochemistry from the Universi-
y of Oklahoma. She is interested
in a fellowship in Ophthalmology
with an internship in Pediatrics.
Through booms and busts, rain and drought, since 1906 Baylor All Saints Medical Center at Fort Worth has been here to meet the health care needs of the community. Over the course of the last century, as Fort Worth has grown and become more diverse, so too have the services and advanced technologies offered at Baylor Fort Worth. One thing that hasn’t changed, though, is our commitment to being the best place for safe, quality, compassionate health care. Whether it’s being named “Best Local Medical Center” by Fort Worth Star-Telegram readers, or perennially appearing on U.S. News & World Report’s “Best Hospitals Metro Area” list, we have built a long history and strong reputation as the place North Texans turn to for comprehensive health care.
As stakeholders and planners extrapolate from our recent Ebola virus experiences to refine policies in preparation for the next public health emergency, it’s well to remember the following:

We have vast resources of knowledge, materials, logistics, manpower and determination which we can apply to accomplish a common goal. We may be distracted at times by politics and the insistence of insatiable media outlets, but we can rise above such pressures to achieve our purpose. We unquestionably possess the expertise and ingenuity to neutralize Ebola Virus Disease or any other such threat.

We have proven ourselves eager to share our resources, including personnel, with neighbors and distant countries less capable than ourselves of mounting a proportionate response to a challenge such as Ebola Virus Disease. We can plant the seeds for future successful control and eradication policies and for the reacceptance of Ebola Virus Disease into their communities.

While we may be prone at times to alarmism regarding our risk or the threat of transmission to our patients, families and colleagues - especially when the disease in question is unfamiliar and fearsome - we are capable of transcending our anxieties to do our best work.

We occasionally overcorrect with policy changes which are not always proportionate to the threat, and, in the heat of the moment, implementation of new guidance may run afoul of intent. We may also at times perceive a loss of control to distant authorities advising changing guidance in response to an evolving understanding of a previously unimagined threat. However, we can agree on the shared goals of securing our safety as health care workers, the welfare of our patients and the promotion of the public’s health here and abroad.

We can work to achieve balance in response to the challenges posed by returning health care workers, and military and civilian support personnel from “hot zones”. We should temper our concerns with appreciation for the services performed and the risk assumed by those traveling to the most affected and most under-resourced areas where diseases such as Ebola Virus Disease can so often gain a foothold.
OFFICE OVERHEAD EXPENSE

Peace of mind for you and your practice

Protect your medical practice from the unforeseen
Disabilities can strike without warning, affecting not only your health, but also your ability to keep your practice running while you are recuperating. If you were to become disabled and could not work, how would you cover office expenses, such as employee salaries, rent, taxes, and utilities?

Office Overhead Expense Insurance, issued by The Prudential Insurance Company of America (Prudential) and endorsed by the TMAIT, can help pay for regular monthly office expenses to keep your medical practice operating if you were unable to work due to a disability.

Exclusively for TMA members
- 24/7 coverage
- Benefits for total or partial disability
- A customized policy to fit your needs
- Coverage you can keep if you move out of Texas

Plan provisions
- A maximum monthly benefit amount to $35,000
- Coverage you can retain up to age 75
- TMA Members can apply up to age 70
- An expanded list of eligible overhead expenses to reflect the changing practice environment, including:
  - Charges for electricity, telephone, heat, water, and laundry
  - Employees’ salaries or wages
  - Payments for leased equipment and furniture
  - Car allowances (as related to the practice)
  - Interest on existing business loans incurred
  - Business insurance premiums
  - Payroll taxes, plus rent or mortgage interest payments
  - And more!

Request coverage today!
Don’t put off getting this important insurance protection for your practice. Call 1-800-880-8181 or visit info.tmait.org/ooe for more information and to apply using the downloadable form.
The collaboration between partners in recent months since Ebola Virus Disease landed on our shores has taught us much about our capacity for sharing and comparing and has provided countless opportunities for careful examination of tasks done well and of targets missed. We have been able to reinvigorate and reprioritize preparedness planning. We need, however, to support the importance of preparedness in our post 9/11 and ongoing Ebola Virus Disease world with the resources necessary to serve as a beacon to others, and to maintain and fortify the trust of the public in our abilities to respond to any public health challenge.

Our recent Ebola Virus Disease experiences have also resulted in a much needed frenzy of interest and work to develop effective vaccines against a dreadful and costly disease, and the spill-over effects may allow for inroads into vaccine development for other serious diseases without effective and available treatment and with high human cost.

If Ebola Virus vaccines can fulfill their promise, the national conversation about vaccine declination in general may shift to a more supportive stance towards the indisputable value of vaccine development and implementation to recent (post Edward Jenner, 1798) human history.

Lastly, as we soldier on, we must combat isolationism and xenophobia in order to minister to those most at risk and in need. The experience of Ebola Virus infected patients and health care workers in our midst should serve to bring home to all of us how small and interconnected our world is. If we can learn these and other Ebola lessons we can control and eradicate scourges like Ebola Virus Disease at their source and ready ourselves for the next such crisis.

**CDC recommendation:**

Test everyone born from 1945-1965 for Hepatitis C

People born from 1945-1965 account for 3 out of every 4 people with Hepatitis C, and more are unaware of their infection.

- Testing only patients with elevated ALT's may miss 50% of infection
- Hepatitis C is a leading cause of liver cancer and liver transplants
- Care and treatment can help prevent Hepatitis C-related disease and deaths
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The Arlingon Medical Society presented the Physician of the Year Award to Dr. Fred L. Bishop. The event was held at the Rolling Hills Country Club on February 17, 2015. The middle photo is AMS President Dr. Theresa Crouch presenting the plaque to Dr. Bishop.

**Fore!**

**GETTING TO RETIREMENT** is one thing. Having enough money to enjoy it is another. That’s why at The Principal®, we offer many ways to help you to maintain a steady income stream well beyond your working years. From IRAs to annuities to mutual fund investments, we can customize a strategy to help you aim for growth while helping you meet your income needs. After all, why should you stop at retirement, when you can shoot for more?
Medicus Insurance Company is transitioning to its parent company—NORCAL Mutual Insurance Company. Same exceptional service and enhanced products, plus the added benefit of being part of a national mutual. As a policyholder-owned and directed mutual, you can practice with confidence knowing that we put you first. Contact an agent/broker today.

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Check out the First Tuesdays website, www.texmed.org/firsttuesdays, or call (800) 880-1300, ext. 1361, for more information.
Join the party of medicine in Austin at First Tuesdays at the Capitol.

First Tuesdays at the Capitol is a great way to become active in the politics of medicine.

Register at www.texmed.org/firsttuesdays or call (800) 880-1300, ext. 1361.
T’was the Spring of eighteen sixty-three;  
The South, from anaconda, sought to be free.  
The war was at a stalemate, in the West;  
An Eastern victory might restore zest,  
Granting hope to an independence sight  
That appeared obscure due to Yankee might.  
Joe Hooker had revived the Yankee’s best  
Seeking Lincoln’s new victory request.  

At Fredericksburg, both wintered face to face  
With no major conflict, by their own grace.  
Hooker sought to encircle old Bobby Lee  
Then destroy his army, or seek his knee.  
Crossing the Rappahannock at Kelly’s Ford,  
He left Sedgwick opposing The Rebel horde.  
Rashly he sent his Cavalry south, en masse.  
To sever railroads, attack, and harass.  

Wisely, Lee kept loyal Stuart close by,  
Moving his troops west, since Hooker was nigh.  
Devoid of mobile eyes, Hooker couldn’t see  
Or locate the forces of Bobby Lee.  
He hesitated, stopping his advance,  
Thus losing vantage and victory’s chance.  
“Withdraw to Chancellorsville, entrench ‘n fortify.  
Let them attack and on our ramparts die.”  

Hooker’s Officer Corps heard with dismay  
For they knew the move would cost them the day.  
Stuart’s Cavalry had secured the roads.  
Lee stayed his troops, preparing for what bodes.  
At dusk, on the Plank Road, Jackson met Lee  
But a Union sniper caused them to flee  
To a nearby stand of stately pines,  
About a mile ‘n half from Union lines.  

“General Stuart galloped up with flair;  
“I have a report, for which you’ll care.  
Fitzhugh Lee says Hooker’s right flank’s afloat.  
There’s no hill, or secure anchor of note.”  
Old Stonewall was pleased, his eyes all ablaze.  
He had a-waited this for many days  “Can we access his flank and not be seen?”  
“I’ll see,” replied Stuart, leaving the scene.  

Lee asked,” General Jackson what’d you do?”  
“I’d attack and give Hooker his just due.”  
“By your leave sir, my men will march at four.”  
Lee, pleased, could ask Jackson for nothing more.  
Lee was awakened with more news of defense.  
Jackson seemed concerned, this he could sense.  
Stonewall was staring into a small fire,  
Seated with his surgeon, Hunter McGuire.  

Jackson saw Lee and told him forthright;  
“I’m waiting for news of roads out of sight”  
Major Hotchkiss and the Chaplain’s son  Are scouting hard roads not bathed by sun.  
Hotchkiss spread a map on a hardtack box,  
Pointing out safe, hidden lanes with sparse rock.  
Jackson asked Lee, “Which way would you go?”  
Lee then traced a march route that flanked their foe.  

Bobby Lee asked Jackson what was his plan.  
“My Corps will attack ’n fight to the last man”  
I’ll have just half of my Army, Lee thought,  
But he sensed a defeat that was long sought.  
Jackson exclaimed, “Our troops will march at seven,  
To a glory, bequeathed by heaven.”  
After brief sleep, they were awake at dawn.  
Lee was on Traveller, strong as a faun.  

Jackson, on Little Sorrell, saluted Lee  
And commanded his troops-march to victory.  
They marched, two abreast, to Catherine Furnace;  
Then towards the Brock Road, at a brisk pace.  
Stuart’s Cavalry shielded their north and rear  
In case Yankee encroachment came too near.  
Steadfastly, to the Orange Plank Road they went,  
Hot, sweaty, and tired but not nearly spent.
Then up galloped General Fitzhugh Lee.
“General, there’s a sight you need to see.”
Lee led Jackson to a wooded hill’s top,
Where the view made Jackson’s heart almost stop.
Stonewall shaded his eyes, glowing like fire
For he saw the Yanks set to eat, then retire.
We must move further north, at least two miles,
The road’s angle would endanger our files.

At five o’clock, Jackson ordered attack;
He urged his Leaders” Press forward, never back.”
The Wilderness green ’n briars tore at their clothes,
But steadfastly they charged, rows upon rows.
From the brush ran animals, hares, foxes, ’n deer.
The Yanks whooped and hollered, the sight so queer.
Suddenly their ranter froze in their craw;
There was no time for their weapons to draw.

Now in place was a mile long line of gray
And they knew instantly, there’d be hell to pay.
Butternuts, bayonets gleaming in the sun,
Rebel yelled, then attacked on the dead run.
The Yankees dropped all and fled pell-mell,
Convinced they had divined the gates to hell.
Jackson urged his men to ruthlessly troop,
Not giving them time to pause and regroup.

Federal cannon facing to the west
Were now turned ’n fired by their leaders hest.
Now old Joe Hooker had heard of the rout;
So he ordered Sickles Third to wheel about,
As he rode into the bloodstained storm
Which was the source of prodigious alarm.
Jackson urged Hill,”Cut them off from US Ford;
As we drive the rest to Lee’s mighty sword.”

Jackson’s haste, opposed to his usual calm,
Was augmented by dusk’s impending balm.
A large full moon rose, shining eerie light,
More than enough, to continue the fight.
Whippoorwills serenaded the full moon.
Wilderness burned as hell but not in tune.
Stonewall realized they had seized the day
But destruction required a prolonged fray.

Jackson and staff searched for a US Ford route
And heard Federal axes, without a doubt.
Harsh cannonade drove them off the turnpike
Making them wonder which missile would strike.

A musket burst made Little Sorrel rear.
It came from friendly fire, certainly near.
Stonewall raised his right arm to fend off brush,
’n suddenly felt a painful, searing crush.

The intense volley produced timely hits,
Causing men to fall and horses shed bits.
An officer inquired, quite outspoken,
And Jackson allowed his arm was broken.
They helped him from his horse and stanch’d the blood
Which flowed from the wounds, as a raging flood.
Fortunately, a sound litter was found
While his bilateral wounds were fixed and bound.

Four men carefully raised him to their shoulders
Carrying him thru woods with roots ‘n boulders.
One,shot, tripped in the eerie moonlight
And Jackson’s fall gave them sickening fright.
By fate they located an ambulance,
Which was waiting near, not filled by chance.
Dr. Mcguire met them at Chancellor house
And inquired of pain he needed to douse.

He examined Jackson while nearby kneeling
Trustong the pain was now beyond feeling.
“I’m injured, Doctor, afraid I’m dying.
To say otherwise, would surely be lying.”
They left fast as the ambulance could ride
While Dr. Hunter McGuire knelt at his side
And gently grasped the bleeding artery
To stop any blood the air could see.

Arriving at the hospital without alack,
Dr. McGuire then consulted with Dr. Black.
“We need to inspect your wound, with sedation;
It may need an amputating operation.”
Jackson said, “Yes, certainly, Dr. McGuire,
Do what your judgment thinks it will require.”
The anesthetic, a lenitive thing,
Caressed Stonewall with blessings, it did bring.

They excised, from his hand, a musket ball
Proving it was friendly fire, after all.
McGuire had to amputate his left arm,
Relieved to see there was no other harm.
Jackson awakened at nine in the morn,
Actually feeling well and not forlorn.
Distressed about the wounding of A.P. Hill,
Jackson ordered Stuart to fill the bill.
The message of the transfer went to Lee. He dismissed all but, Smith, his orderly. He asked his wife to return, if she could, since the doctors thought, recover he should. He was told his arm was buried with ceremony; Jackson said fine, long as it had to be.

A long day, his tiredness he couldn’t hide. Also pain developed, in his right side. Dr. McGuire examined, finding nothing wrong. Offered sedation, to bring relief along. His orderly brought a message from Gen. Lee, congratulating him on his victory.

Jackson chose Chandler House at Guiney Station as a good spot for recuperation. Major Hotchkiss mapped the lengthy route. Stonewall discussed strategy and what worked out. The trip, arduous, was tiring to him. Causing nausea and other symptoms, grim. Dr. McGuire tended to his problems ‘n need, thankful that his wounds did not weep nor bleed.

His rooms, newly painted, were clean and neat. Looking out on a spring garden, quite complete. He thankfully snacked on tea and bread. Later Dr. McGuire saw no cause for dread. Waking, refreshed from a good night’s sleep, he posed questions, he thought, wouldn’t keep. How long before his multiple wounds healed so he could command and return, to the field?

McGuire answered, evasively, "should be soon." Thinking, to the South, that would be a boon. Lee, worried, sent Dr. Morrison to attend and aid Dr. McGuire, helping Jackson mend. "You lost your left arm but I lost my right" Lee relayed, regarding the South’s plight. Jackson awakened at one in the morning. From pain in his side, an ominous warning.

Pneumonia was McGuire’s diagnosis; so certain, it was difficult to miss. The Doctor tried his armamentarium, but Jackson remained in a delirium.

Anna, his wife, arrived soon with their child. And was distressed to see her husband wild, ranting and raving from drugs and high fever. The scene smote her mind like a mighty cleaver.

Jackson was in and out of conscience state, recognizing his wife, his mind did sate. He ordered his officers, mostly Hill to attack with gallantry, honor ‘n skill. It was Sunday morning, the tenth of May; McGuire told his wife he would die this day. Jackson asked Rev. Lacy’s wife to read a Psalm, but he was too weak to gain from its calm.

Anna told him today he’d be in heaven and he said I’ll gladly die, on day seven. His last words they repeated from their knees, “Let us cross over the river and rest under the shade of the trees.” Lee sent a telegram to the Secretary of War, telling of the South’s greatest loss, so far. His body will go to Richmond tomorrow with Major Pendleton and all our sorrow.

Thus passed Stonewall, one of America’s great, who loved his God, family, and State. He served the South and Lee with passion dear, facing his battlefield foes with little fear. The South’s victory came at a great cost, which would aid many future battle loss. Lee and Hooker sparred for several days after Stonewall’s wounds took him from the frays.

Hooker’s commanders saw the hue of his liver when he ordered, “retreat - across the river.” Chancellorsville was costly to both sides, mainly the South, feeling engulfing tides of increasing manhood devastation proceeding subsequent annihilation. The rest of the war, recorded in history, tarnished not Jackson ‘n Lee’s apogee.
Our TCMS Family Members
APRIL 28, 2015
RIGHT CARE CONFERENCE

An evening of conversation that can make a difference...

This 2 hour event, held at the medical society building, will bring together physicians and hospital leaders in an interactive discussion led by the Lown Institute. Discussion topics will include:

- Identification of ways in which the current health care environment promotes the delivery of care that may be unnecessary, unwanted or unhelpful;
- Barriers to meaningful change;
- The role played by our current system’s fragmentation and lack of care coordination;
- How the medical community can work together to remove these barriers and facilitate better and more cost-effective care for patients.

About the Lown Institute...
The Lown Institute, founded by Dr. Bernard Lown who pioneered the DC defibrillator, seeks to catalyze a grassroots movement for transforming healthcare systems and improving the health of communities. Their strategy is to develop a “RightCare Alliance” of health professionals who want to:

- Engage the public through events intended to foster democratic dialogue about health and healthcare,
- Help communities envision a better system, and
- Advocate for the necessary change.

Be part of the solution!
Round table discussions
1.25 ethics CME credits
CME free if you pre-register
Light dinner provided

TARRANT COUNTY MEDICAL SOCIETY
555 Hemphill St
Fort Worth, TX 76104

Please pre-register by contacting Melody Briggs
817-732-2825
mbriggs@tcms.org

Tuesday, April 28, 2015
6:00—8:00 PM
WHILE THE EDITORS SLEPT:
ACTUAL NEWS HEADLINES

“Parents Hope Crash Will Wake Up Drivers” - Denver Post
The real problem is, how do you wake them up before the crash?

“GM Puts Brakes on New Rear-Wheel Drive Vehicles” - Detroit News
Optional on earlier models.

“8,000 Pot Plants Found; Two Arrested” San Francisco Chronicle
The others escaped?

“Pelosi Seen Moving Around Bush in Mideast” - San Francisco Chronicle
Strange behavior so far from home.

“Human Remains Found in Marietta” Atlanta Journal-Constitution
Let’s hope he stays found.

“Gasoline Prices on the Rise, Crack $3 in California, Hawaii” - FoxNews.com
Gas may be expensive out west, but apparently drugs are cheap.

“160,000-Year-Old Child Suggests Modern Humans Got Early Start” - National Geographic News
She ought to know.

“Aspirin Protects Women From Dying of Any Cause” - Bloomberg News
A wonder drug, maybe, but this would be a true miracle drug.

“Disabled Turkey Hunt to Be Held” Moberly Monitor Index
This doesn’t sound very sporting.

“Man Shot by Pistol Thrown in the Trash” - Associated Press
An ignominious end.

“Police Seek Help in Killing” - Orange County Register
What happened to ‘Serve and Protect’?

“Phony Pipe Bomb Exploded in Northeast Charlotte” - WSOC-TV (Charlotte, NC)
Must not have been phony after all.

“Inspector General Says School That Uses Shock Therapy Overcharged” - AP
Better decrease the voltage a bit.

“Traffic on 1-10 Eastbound Near Downtown Slows After Death” Houston Chronicle
As do most things.
for office in Texas who are most likely to support the TMA’s legislative initiatives. Whether you are a member of TEXPAC or not, you benefit from its existence. I am firmly convinced that each of us needs to shoulder our part of the load by being members of TEXPAC every year.

Most doctors I know are data-driven; so let me share a few numbers with you regarding TEXPAC participation among TCMS physicians, so that you can understand where you fit in the picture as an individual. In 2014, 305 of 2200 (14%) active physician members of TCMS were members of TEXPAC. Only 14%! By the way, THANK YOU to every one in that 14%! You are carrying the load for the entire membership of our medical society.

There are four levels of membership in TEXPAC: Basic ($125/year), 300 Club ($300/year), Capitol Club ($1000 per year, covers both physician and Alliance spouse) and Patron ($5000 1st year, $2500/year thereafter, covers physician and Alliance spouse). Tarrant County physicians and Alliance members contributed about $90,000 to TEXPAC in 2014. 50% came from the Basic members, 10% from 300 Club, 18% from Capitol Club, and 22% from Patron Club.

The application for TEXPAC membership can be found in this issue on page 9.

Where are you in these numbers?

2. Attend local TEXPAC seminars (2 hours; once or twice yearly)

Clayton Stewart, director of TEXPAC, and members of the TMA lobby team will typically visit Tarrant County once or twice every year to provide a legislative update. If you are interested in learning about how candidates are evaluated, how endorsement decisions are made, and which are the important legislative issues, here is your opportunity. Please watch for notices regarding these meetings. Note that the time required for this activity is minimal.

3. Interview Local Candidates (2-8 hours, every other year)

The TEXPAC staff and TEXPAC Board rely on local physicians to assess candidates in their districts. We typically will arrange a time to interview candidates in a contested race to determine which might be worthy of an endorsement. These interviews can be quite enlightening. You may contact the TCMS staff or me if you are interested in participating.

4. Attend “First Tuesdays”

Lobbying Days (1½ day, 1-4 times, every other year)

The TMA has sponsored “First Tuesdays at the Capitol” for a number of years. These well-organized events draw physicians and Alliance members from all over the state to Austin on the first Tuesday of each month from February through May during the legislative session. En masse, the physicians, Alliance members and support staff visit legislative offices to educate and encourage our elected representatives regarding important legislation. With rare exception, our representatives are not experts in health care. They need our input as they consider legislation regarding health care issues. Those of us who are “regulars” at First Tuesdays would greatly appreciate your participation.

5. Become a member of the TEXPAC Board (Friday afternoon-Saturday morning, 3-4 times per year during TMA meetings)

The TEXPAC Board and its committees do most of the nitty-gritty work of evaluating candidates for consideration of endorsement. These decisions are often difficult and nuanced; it is a fascinating process to observe. The TEXPAC Board functions best when it receives input from a broad range of physicians.
6. Work as a volunteer on a campaign (time required: always more than you have to offer, so you just do what you can)

Campaigning is arduous work. There are always more tasks than there are workers to accomplish them. If you ever want to prove to a candidate that you truly support him or her, volunteer to work on the campaign. During my first campaign as a volunteer, I was stunned to learn how much work was being done by a very small group of dedicated people. It is hard to describe this without being sappy, but working on local campaigns feels deeply patriotic.

7. Run for office (truly 24/7 while campaigning)

I am deeply grateful to the handful of physicians who have made the sacrifices required to run for office, and serve when elected, in the Texas House and Senate. The presence of physicians in both the House and the Senate is of great significance as bills affecting health care are considered. The non-physician members rely heavily on their guidance. Without doubt, the physicians who choose to run for office make the greatest sacrifices to have influence in the process.

In Closing:

I hope this list convinces you that becoming a member of TEXPAC is not time consuming, is reasonably painless financially (the basic membership is about $10 per month), and will allow you to be an active participant in a critical function of our society. As I mentioned in my first article this year, we need each other. We are much more effective when we pool our efforts. If you have not done so, please find a membership application and join TEXPAC immediately. Also, please inform either a TCMS staff member or me if you would like to become more involved.

1 in 6 persons living with HIV does not know it.

- People accessing health care are NOT routinely tested for HIV.
- Persons unaware of their HIV infection are unable to benefit from care.

Learn more at www.testtexasHIV.org
I’ve had a bad case of writer’s block for about 2 years. That’s the last time I wrote an article for the Tarrant County Physician. My avid readers will recall that in writing my last article, I had the great honor of riding my bicycle with the Mayor of Fort Worth, the Honorable Betsy Price. I was proud of that article, and believed at the time that I would use it as a stepping stone towards writing for the magazine more regularly. I’ve chaired the Publications Committee for almost 4 years. When I took this responsibility, I felt it was my obligation to write as often as possible. Alas, fate had other plans in store for me.

The privilege of chairing this group of dedicated Tarrant County physicians was given to me by our former president, Dr. William Bradley. Many of you will recall that Dr. Bradley was everyone’s friend, and my BFF. He served as the chair of the Publications Committee for 4 years before handing the reigns over to me. We would review the articles up for consideration and muse over their merits. Most of the writings made it through Publications eventually and onto the pages of our community’s magazine. Our meetings were never quite so draconian, but rather more like Cheers, a few friends sitting around a bar where everyone knows your name, talking about the state of affairs, life, the universe, and everything. I often thought of The Dead Poets’ Society, so much so that Dr. Bradley was “Oh Captain My Captain,” and I just wanted Neil to call me Nuwanda.

So... Why the writer’s block? We have so many things to discuss and write about. Even now, our meetings descend into the maelstrom of our everyday lives. More often than not, lately, our discussions descend into diatribes and debates on Obamacare. Perhaps from the President’s opinions on how health care needs to be delivered, the group swings to the secrets of ancient Chinese medicine. China, you say? Well then all of a sudden, we are discussing the latest traveling adventures of one of our friend’s friends. There is always so much to extrapolate on. It seems, however, that our lives get in the way. I could have written about any of these issues for any of our issues, but I did not.
I could have written about so many of the things that are going on even in my own life. I could have written a follow-up article to the biking article, talking about riding in the Tour de Cure, a cycling rally sponsored by the American Diabetes Association, in which I rode 65 miles in 110 degree heat in one lovely morning. Then, I should have written about the accident and massive head injury I sustained while skiing in Colorado. I was out of work for 2 months, and my solo internal medicine practice almost folded. I didn’t have any disability coverage but that didn’t really matter. As many of my friends know, I don’t count myself lucky to be working again, rather I count myself lucky to still be taking each and every breath I take to this day. Later on, I did write about the passing of my friend, Dr. William Bradley, but that was not an article. It was a eulogy that was reprinted in the Physician by my good friends at the medical society. To go through this progression of writer’s block, there was a time while I was training for a race that I was too tired to write. Then, there was simply a long period of time when I could not write, because I was simply trying to be alive and recover from the head injury. Finally, there was a period of time when I was too overcome with sadness to write.

As physicians, we are astute scientists, trained to notice details. Many of you are already noting that Dr. Bradley passed over a year ago, so why does the writer’s block still continue? Unlike CNN, not all of my news has been depressing. You see, I will write later on this year about the greatest thing that ever happened in my life. I will tell all of you about the adoption, and the birth, and the life of my beautiful baby girl, Mariya, who is the sunshine of my life. Though she is only 10 months old now, she has already given me a lifetime of joy. As many of you are well aware, fatherhood is the greatest joy I believe any man can ever know. As I write this, a grin crosses my face. Mariya has fallen asleep next to me, reminding her father that if he isn’t stopped, then sometimes he can go on and on. She nestles her head against my chest and lightly coos, telling me that I need to wind this up so that we can get on with my most important moment of our day, when I rock her in my arms as I carry her to her crib and to sleep, gently singing her favorite lullaby, the Guns and Roses song Sweet Child of Mine.

I want to conclude by thanking all of the writers that have filled our pages, our minds, our hearts, with their words over the last several years. It has been an honor and my privilege to serve the medical society. I hope to continue to do so. I would humbly implore more of you to get over your own cases of writer’s block and submit to the magazine. I look forward to reading from all of you. The Publications Committee has tasked me this year to get over my own writer’s block, so I intend to write this op-ed piece every month from now on. I hope you enjoy reading as much as I enjoy the process of writing. My name is Hujefa Vora, and this is this month’s Last Word.
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