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Cover Photo: Pictured (l to r) are Assemblywoman Pam Hunter, OCMS President Dr. Mary Abdulky, and Assemblymen Will Barclay and Al Stirpe at the 2017 Legislative Breakfast and Roundtable Discussion.

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COMING Events

The Quality Zone: Strategies for Physicians to be Their Best to Achieve Their Best (and Not Burn Out)
Thursday, April 6 • Learbury Building, 329 N. Salina St., Ste. 301, Syracuse

This program is the second of a six-part CME series, “The Quality Zone: Strategies for Physicians to be Their Best to Achieve Their Best (and Not Burn Out).” If you missed the first part do not hesitate to attend: a brief recap of the previous session will be conducted before the new session begins. Click here for more details and future dates. This series is being offered by OCMS in collaboration with Crouse Health, and conducted by Dr. Mickey Lebowitz and Ron Fish, PhD, to help physicians learn practical strategies to: optimize their individual capabilities, improve interactions with colleagues, staff and patients, and positively impact the varied environments and cultures in which they are involved. The goal is to teach strategies to achieve wellness, combat burnout and help physician attendees be better positioned to meet their increasing professional demands. This program is open to all physicians in our community and their spouses/significant others. First preference will be given to OCMS members. Seating is limited. All meetings will be held from 6-8 p.m. at 329 North Salina St., Ste. 301, Syracuse. For more information or to register call OCMS at (315) 424-8118, or email us at oncms@oncms.org.

Eldercare Foundation’s “Gift of Age” Cabaret
Friday, April 7 • Sheraton Syracuse University Hotel and Conference Center

The Eldercare Foundation’s 10th annual “Gift of Age” Cabaret will be held in memory of the late Amelia Greiner, community advocate and founder of Home Aides of Central New York, a division of VNA Homecare. The event is scheduled for Friday, April 7, 2017 at the Sheraton Syracuse University Hotel and Conference Center. Tickets are $150 per person and may be purchased by calling 315-477-9301, emailing abyrne@477home.org, or by visiting www.477home.org/eldercare-foundation-events.
Ask the Carriers Conference
Thursday, May 11 • Holiday Inn, 441 Electronics Parkway, Liverpool

This year’s Ask the Carriers Conference will be held on Thursday, May 11, from 8 a.m. to 3:30 p.m., at the Holiday Inn, 441 Electronics Parkway, Liverpool, NY. As in the past, we will also have an extensive exhibitors area located nearby, and this year we have a couple of surprises in store--stay tuned for details! Here is a preliminary list of carriers and presenters confirmed to be on hand to answer attendees’ questions. Additions will be shared when confirmed: Molina Health (Formerly Total Care) National Government Services, Medicare Part B CSRA/ eMedNY-Medicaid Noble Health Services, “A Specialty Pharmacy in Your Community,” Aetna, Excellus BC/BS, POMCO, and MVP Healthcare. Click here to download a registration form. We will see you there!

New York State Fair
August 23rd - September 4th • NYS Fairgrounds

The Onondaga County Medical Society will once again help staff the MSSNY booth at the NYS Fair this year. We will need physician volunteers to represent OCMS at the booth. Volunteer sessions normally run in 4- to 6-hour shifts. However, we will work around your schedule. To volunteer for the fair, or for more information, please contact Patty Corasaniti, corasaniti@oncms.org.
Physician colleagues have told me on multiple occasions “I dread waking up in the morning to go to work. I believe I should retire soon, but I am young and I don’t know what to do with the extra time. Do I need a change of scenery, or should I begin teaching students, or take an administrative job?” How many times have we heard of a suicide or hospitalization of a colleague with severe depression?

Physician burnout is a destructive disease afflicting medical communities, leading to rapid attrition in experienced providers, and compromising patient care on multiple levels. The symptoms range from emotional exhaustion, a poor sense of accomplishment, depersonalization, and lack of efficacy, to advanced mental disturbance leading to suicide. The problem is rampant and affects 46% of physicians who responded to a lifestyle survey by Medscape published in 2015, which represents an increase from 39.8% of respondents in a 2013 Medscape survey. It demands a swift intervention from all responsible parties, including the affected individuals.

The problem is multifactorial, and like any disease state requires treatment, yet a better option is a preventative approach to reduce the incidence and/or make the disease manageable.

Factors leading to physician burnout can be placed in two major categories:

The first category includes factors that are likely beyond our control. For example, the new government regulations, which demand enormous amount
of physician time, related to the implementation of electronic medical records. Then there are insurance authorization and quality metrics paperwork, coupled with decreasing reimbursements. Divergence in values and purpose of the practice leadership or employer and the individual physician, leads to chronic frustration. Private life disasters, such as illness, the death of a spouse, marital separation, financial problems, etc., are significant distracters.

The second category includes factors that we likely can control. For example, a chaotic work place wastes time and energy. Mixing private life and practice life, taking work home or bringing home problems to work, also adds to stress. Excessive individual financial goals discourage the sacrifice of money for more free time, and ignoring one’s personal health leads to physical and mental illness, etc.

Addressing the root cause of the problem – physician stress – will help craft a solution. We should start eliminating, avoiding or reducing the stressors we are likely able to control, while helping the affected physician cope with stressors likely beyond his or her control.

Examples of preventative measures that may be taken to eliminate or reduce avoidable stressors include: organizing work environment and personal schedule; maintaining boundaries and balance between home and work; appreciating diversion-time activities like family time, sports, arts, music, dancing or yoga; maintaining regular health checks; and setting appropriate financial goals that allow a tolerable trade-off between gaining personal time and making an income.

Examples of preventative measures that may be taken to cope with unavoidable stressors include: adjusting the work flow, at least during the implementation of new electronic medical records, or to fit ability or personality; shifting the work the physician does not need to perform themselves to reduce the workload by hiring people such as scribes, MAs for paperwork, and secretary/billing to deal with insurance authorization and quality metrics paperwork; and choosing the appropriate culture and work environment to fit with the

“Physician burnout is a destructive disease afflicting medical communities, leading to rapid attrition in experienced providers, and compromising patient care on multiple levels.”

Physician burnout is a destructive disease afflicting medical communities, leading to rapid attrition in experienced providers, and compromising patient care on multiple levels.”
physician's goals, communicating openly with leadership about goals and culture.

Our medical society is currently taking on this issue with commitment, to shine a bright light on it through educational efforts directed to physicians and organizations in the area. OCMS hosted two free programs that provided physicians with valuable information and helpful coping tools in an effort to address this quiet medical epidemic affecting our profession.

The first program, titled “The Making (and Breaking) of a Physician,” took place on the evening of February 28, and was presented by Jessica Mitchell, MD, MSc. She is the University of Rochester OB/GYN residency program wellness coordinator, and one of the founding members of the URMC Resident Wellness committee. During the program, Dr. Mitchell illustrated how our medical cultural heritage, current medical climate, and individual factors combine to make physicians profoundly vulnerable, despite being inherently resilient and capable individuals. Through personal stories physical demonstrations and, Mitchell offered examples of both real-life situations and concrete, implementable strategies to help strengthen resiliency, well-being, engagement, and fulfillment for physicians, residents and attendings.

The second program took place on March 2, and was actually only the first of a six-part CME series, “The Quality Zone: Strategies for Physicians to be Their Best to Achieve Their Best (and Not Burn Out).” Click here for more details and future dates. This series is being offered by OCMS in collaboration with Crouse Health, and conducted by Dr. Mickey Lebowitz and Ron Fish, PhD, to help physicians learn practical strategies to: optimize their individual capabilities, improve interactions with colleagues, staff and patients, and positively impact the varied environments and cultures in which they are involved. The goal is to teach strategies to achieve wellness, combat burnout and help physician attendees be better positioned to meet their increasing professional demands.

I hope colleagues have and will take advantage of the assistance, guidance and tools provided through these opportunities.
So What’s New?

This is a common greeting we all often use every day. In terms of the Onondaga County Medical Society there are a few new and exciting benefits and services:

In Any Language, This Translates to A Cost Savings & Member Benefit!

OCMS is pleased to announce a new relationship and member benefit in cooperation with the Multicultural Association of Medical Interpreters of CNY (MAMI). OCMS members can access and download a flier containing the following appropriate message which can be used in your offices “Attention: If you speak a language other than English, assistance services, free of charge, are available to you in this office. Please ask.”

This tag line will be in the top 15 languages in Central NY including: Arabic, Bosnian, Burmese, Cantonese, Farsi, French, Italian, Karen, Mandarin, Nepali, Russian, Somali, Spanish, Swahili, and Vietnamese.

The flier (a $500 value) is at no cost to members and can be accessed via the Secure Member Login section of our website, www.oncms.org. It can be laminated and placed throughout members’ offices.

Furthermore, MAMI can provide on-site interpreting services at the reduced rate of $55/hour for OCMS member physicians. This saves members $5/hour on those costs. MAMI will also provide written translation services at a
10% discount. Quotes will be given to providers based on the project. Current physician membership status with OCMS will need to be confirmed before a discount offer is extended. Members should take advantage of this important service… at a special rate.

No-Cost Opioid Training Course Available to Members through MSSNY

The following information was largely excerpted from MSSNY President Malcom Reid’s Message in early January 2017:

“By July 1, 2017, every physician and prescriber who has a DEA registration will need to complete three hours of course work or training in pain management, palliative care, and addiction. Governor Andrew Cuomo and the New York State Legislature passed the measure in June 2016 as part of a comprehensive package to combat opioid abuse that also included extensive new requirements on health insurers to cover needed treatments. The Medical Society of the State of New York has been working with several knowledgeable and dedicated physician members and the NYS Office of Alcoholism and Substance Abuse Services to develop a program that comports with this statute.”

MSSNY has now developed this program in conjunction with the New York State Office of Alcoholism and Substance Abuse Services, and it covers the eight topic areas articulated within the NYS statute.

This course is valued at $150. However, OCMS & MSSNY members will be able to access and take the course at no cost.

The statute specifically requires that prescribers need course work in the following:

- state and federal requirements for prescribing controlled substances;
- pain management;
- appropriate prescribing;
- managing acute pain;
- palliative medicine;
- prevention, screening and signs of addiction;
- response to abuse and addiction;
- and end of life care.
Officials from the Department of Health’s Bureau of Narcotic Enforcement (BNE) have indicated that—for at least the first year—prescribers would simply need to “attest” that they have taken a CME course that includes all the components. This attestation will probably be done electronically through the Health Commerce System and we are hopeful that this attestation will be forthcoming shortly.

The law provides a waiver for a DEA registered prescriber who 1) clearly demonstrates to the department’s satisfaction that there would be no need for him or her to complete such course work or training or 2) that he or she has completed course work or training deemed by the department to be equivalent to the course work or training approved by the department.

Attestation by practitioners is anticipated to be available online with an expected launch in March, 2017 and will be through the Health Commerce System (HCS). The process for seeking an exemption will also be through the HCS and is expected to be in place in March 2017. Click here for a flier providing full details of the CME course.

**A New Peer-to-Peer Recruitment Incentive Is In Place and Worth $40 to You Each Time You Bring a New Colleague into Membership**

Until the end of June 2017, every member physician who recruits a new physician for the Onondaga County Medical Society will receive $40 per recruitment. This can either be applied toward their 2017 dues or paid directly to the recruiting physician. (Some restrictions apply. Click here for full details about the Recruitment Incentive Plan).

Click here for a membership application with the necessary portion to complete and indicate credit for recruiters. A membership brochure and PowerPoint presentation are available in the left-hand column on our website home page, www.oncms.org, to assist you in your recruitment efforts.

Contact OCMS at (315) 424-8118 for details, or e-mail us at oncms@oncms.org.
The Onondaga County Medical Society held its annual Legislative Breakfast and Roundtable discussion with federal and state legislators on February 25. The following elected representatives were able to attend: Assemblyman Will Barclay, Assemblywoman Pamela Hunter, Assemblyman Albert Stirpe, and Congressman John Katko. Scott Butler represented Senator David Valesky that day, who was absent due to illness. Senior Staffer John McBride represented Sen. John DeFrancisco who was out of town, and Assemblyman Bill Magnarelli was represented by Craig Swyecki. Senator Schumer’s office was represented by District Director Joe Nehme and Lori Nguyen. Senator Gillibrand’s office was represented by Regional Director Jarred Jones.

This annual event gives interested physician members and our governing body the opportunity to talk with local federal and state representatives about issues of concern. Physicians in attendance were: President Dr. Mary Abdulky, Drs. Ruth Hart, MaryAnn Millar, Dennis Nave, David Halleran, Brian Johnson, William Schrieber and Robert Weisenthal; Onondaga County Health Commissioner Dr. Indu Gupta, and 5th District Councilor Dr. Howard Huang. Additionally, Medical Students David DiStefano and Marten Peterson were present.

MSSNY was represented by Upstate Outreach Representative Brenda Van Nest and John Belmont, VP for Governmental Affairs.

The following narrative provides some highlights of this morning meeting.

Dr. Mary Abdulky, President of OCMS, presided over this meeting. After breakfast and introductions, there was discussion of matters and legislation at the federal and state levels.

On the federal level, the following topics were discussed:

*The Current Status of the Affordable Care Act (ACA)* – Dr. Abdulky reviewed
concerns relative to the proposed ‘repeal and replace’ initiative of the Republican-controlled White House and both houses of Congress. These are largely the positions expressed by the American Medical Association (AMA):

- Ensure that individuals currently covered do not become uninsured and take steps toward achieving coverage and access for all Americans.
- Maintain key insurance market reforms, such as coverage for pre-existing conditions, guaranteed issue and parental coverage for young adults.
- Stabilize and strengthen the individual insurance market.
- Ensure that low- and moderate-income patients are able to secure affordable and adequate coverage.
- Ensure that Medicaid, CHIP, and other safety net programs are adequately funded.
- Reduce regulatory burdens that detract from patient care and increase costs.
- Provide greater cost transparency throughout the health care system.
- Incorporate common sense medical liability reforms.
- Continue the advancement of delivery reforms and new physician-led payment models to achieve good outcomes, high quality and lower spending trends.

In reply, Congressman Katko reiterated his determination to not vote for repeal before key elements of the ACA are made part of any revision or replacement. Excerpted from his February 26 Week in Review newsletter is the following:

Thanks to the Onondaga County Medical Society for hosting a legislative roundtable discussion on the future of healthcare in this country. The Affordable Care Act is deeply flawed and without action, it has the potential to collapse. However, I have not - and will not - support a repeal of this law without an adequate replacement in motion. Appreciated this dialogue and the opportunity to hear directly from local healthcare providers about what needs to be included in a strong replacement, and I will bring their ideas to Congress.

Dr. MaryAnn Millar, an area gynecologist, expressed concern over the strong possibility that some of the provisions of the present ACA might
be discontinued in any revisions, but should be continued as they relate to women’s health issues: wellness coverage and contraception among present “women-friendly” key provisions.

Dr. Abdulky briefly spoke of the need for paperwork simplification as it relates to MACRA legislation emerging as replacement for the SGR formula. It was noted that if the federal government is looking for simplification and streamlining, this would be an ideal place to start.

Residency Funding – On the topic of the looming shortage of graduate medical education and funding for residency slots, Congressman Katko said he will continue to champion the number of openings through reintroduction of H.R. 2124 (The Resident Physician Shortage Reduction Act of 2015), which seeks to provide 3,000 more residents each year. This should offer some relief for New York. Assemblyman Al Stirpe also said he wanted to see more done to encourage incentives to expand the ranks of physicians in primary care, for rural areas. Rep. Katko added that he feels mental health coverage is another service needed in our communities.

Reaction to the recent Presidential Travel Ban – A three-minute video was shown to the group entitled Dear President Trump: https://youtu.be/aBzAStFbuDE. This video was produced by Upstate Medical Students and carried a pro-inclusive message for viewers. Furthermore, foreign medical students and physicians make up a substantial portion of medical professionals in Syracuse. All applauded this meaningful message.

While Congressman Katko feels the travel ban was done incorrectly, he feels there is need for checking into the backgrounds of people coming into the US from certain countries where there a lack of proper government oversight and procedures. He cited recent acts that occurred in Paris and Brussels.

Dr. Abdulky, a Syrian immigrant herself, agreed that proper screening procedures and an effective immigration process is needed to keep terrorists out of the immigration system. However, she is concerned about the treatment of people who were turned away, and were already qualified to enter the country before the ban, as well as the ban’s unintended impact on Medicine in our area.

Dr. Robert Weisenthal said that immigrants and refugees are the area’s “life blood,” and spoke of a local program called RISE, which integrates refugees into our community.
Knowing that Congressman Katko would need to leave after the federal issues were discussed, Onondaga County Health Commissioner Dr. Indu Gupta spoke of the rising crisis in opioids and mental health issues. She said that in his conversation with House leadership and colleagues, Rep. Katko should stress the connection between poverty and health. Poverty affects all things.

Rep. Katko said he appreciated Dr. Gupta’s perspective and went on to talk of his relevant experiences in dealing with gangs as a prosecutor. He could see the interconnection between the level of poverty and how it affects nutrition, literacy, and employment. He also noted an increase in the rate of Alzheimer’s disease, which is expected to increase dramatically as more baby boomers age.

“**The Affordable Care Act is deeply flawed and without action, it has the potential to collapse. However, I have not – and will not – support a repeal of this law without an adequate replacement in motion.**”


**On the state level, a wide range of legislative issues were discussed.**

Once again, Dr. Abdulky gave a quick overview of the topics and then asked for comments from physicians and elected officials in attendance.

Dr. Abdulky indicated the Governor’s proposed budget would continue funding for the Excess Medical Malpractice Insurance Program at its previous levels, which is most welcomed this year without the usual fight for these funds. However, it would also require physicians to receive a so-called “tax clearance” as a pre-condition of receiving this coverage. This is problematic since there are often good-faith disputes over outstanding tax debts that could jeopardize the availability of this excess coverage for a physician.

In pending legislation, pharmacists would be permitted to enter into “comprehensive medication management protocols” with physicians or nurse practitioners to manage, adjust and change the medications of patients with a chronic disease or diseases who have not met clinical goals of therapy, or are at risk for hospitalization. While similar “collaborative drug therapy” programs exist within the hospital environment, only physicians are currently permitted to enter into such protocols. She went on to say that after reviewing Governor Cuomo’s proposed budget, the Medical Society is very concerned with one of the sections included in the Health Budget (S.2007 / A. 3007- Part
D §13). This section would allow pharmacists to enter into “comprehensive medication management protocols” with physicians or nurse practitioners to manage and adjust the medications of patients. Under a comprehensive medication management protocol, a qualified pharmacist would be permitted to adjust or manage a drug regimen of patients, including adjusting the strength and frequency of drugs.

“Prescriber prevails” protections that currently exist in Medicaid and Medicaid Managed Care would be eliminated, except for atypical antipsychotic and anti-depressant medications, forcing physicians to go through even more burdensome prior authorization requirements. The proposed Executive Budget would add additional administrative burdens to physicians seeking to ensure that their patients who are insured through Medicaid obtain the prescription medications they need. The proposal would repeal most of the protections under current law that presently assure that a physician, not the State or an insurance company, has the final say for recommending which medications will be covered for patients insured by Medicaid and Medicaid Managed Care. Please urge your legislator to reject these proposed changes to “prescriber prevails” protections.

The Medical Society supports legislation to reduce prior authorization hassles, including legislation to permit physicians to collectively negotiate contract terms with health insurers. Dr. Abdulky asked Dr. Dennis Nave to explain further in his role as Syracuse Labor Council President and active member of 1149 Teamsters Local. Dr. Nave elaborated by discussing how continuing consolidation and rapid change in health care delivery, there is a greater need to ensure that community physicians are empowered to fight on behalf of their patients against insurance behemoths to ensure that patients can receive the care they need. Therefore, MSSNY will continue to strongly push to enact legislation enabling physicians to collaborate with their colleagues to collectively negotiate relevant patient care terms with insurance companies.

The state budget fails to include a specific allocation to address the likely shortcoming in payments due to physicians arising from the financial collapse of liquidated insurer Health Republic. There needs to be funding in the budget to address this shortfall. The liquidation of Health Republic insurance company is likely to be completed later this spring with the expectation that physicians and hospitals will only be paid pennies on the dollars for outstanding claims. Many physicians are owed thousands or tens of thousands of dollars or even more. State legislators were doubtful that there are funds to cover these monies.
Women’s Health Issues and Primary Care Physician Shortage

Drs. Ruth Hart and MaryAnn Millar discussed the need for supporting women’s health issues at the state level. Should there be major changes to the ACA, they expressed concern that preventative and contraceptive coverage be allowed in the state. Dr. Millar also said that cervical cancer and colon-cancer screenings presently covered under ACA should continue at the state level.

Dr. Hart also spoke to the increased need for more primary care in rural and urban communities. (See previous Residency Funding under the federal section of this article). Medical Student Marten Peterson said the Doctors Across New York program, while good intentioned, requires early declaration in the area of primary care to be of value to medical students.

Assemblyman Barclay and Assemblyman Stirpe were surprised by this, and said they will look into it. Assemblyman Barclay also spoke to getting support for his bill, A3285, which would increase funding ($5 million) at the state level for residency slots.

Public Health Issues

Onondaga County Health Commissioner Indu Gupta, MD spoke about the current health of the community and referenced the latest Community Health Assessment report, which was released late in 2016 and can be found in its entirety at the County Health Department’s website, www.ongov.net/health.

Dr. Gupta went on to point out that heroin- and opioid-related deaths in the county continue to sharply increase. For example, such deaths in 2015 numbered 56, and by year end 2016, that number was 93. She urged that state and federal support help combat poverty, which can be found at the center of most public health issues. For example, young women who live in poverty will often get pregnant and give birth to more children, who will also live in poverty. The cycle needs to be broken. Syracuse has one of the highest rates of poverty in the country. This leads to negative health outcomes.

She is also concerned with the drug abuse rate in the area, which is also an indicator of mental health issues. Obesity and STDs are additional areas of concern.

Dr. Brian Johnson, Director of Addiction Medicine, from the Upstate Medical University, made a presentation on a proposed Syracuse Addiction Center to help combat this public health scourge. Key plan aspects include a pain service
to provide safer treatments to people using opioids for chronic pain; it would use a “hub and spokes” model utilizing all related programs and clinics in the area. The proposed program will include a research component. An RFP (2017-01) is being applied for, and it is anticipated that a significant amount of funds will be needed to make this a reality.

Congressman Katko suggested that his office and those of Senators Gillibrand and Schumer can assist in securing grants and other funding for this project and other health related initiatives.

Open Discussion

Assemblywoman Hunter started the conversation by saying that collective bargaining is definitely an important topic of conversation among physicians. Additionally, she noted the problems caused in her district by Lyme disease, and the increased need for funding to diagnose and treat that disease.

Assemblyman Barclay said he found the session to be very informative and cited his bill, A3273, which he hoped would help address the synthetic drugs problem.

OCMS is willing to connect MSSNY with Upstate Medical Students to help make the Doctors Across New York program more useable by physicians looking to locate to underserved areas.

All present agreed that the presentations and conversations were most informative and helpful, both for the legislators to understand the concerns of physicians, and for the physicians to hear answers directly from most of their elected officials.

All elected representatives and physicians who participated in this year’s program thought the exchange of conversation was valuable and informative.
The Onondaga County Medical Society would like to thank physicians who made a voluntary contribution to the Society this year. Having reached the non-dues-paying category of life member, these members continue to receive our publications and communications. Their contributions help to defer postage and administrative costs for the retired lunch and other Medical Society events and initiatives.

Your continued support of the Medical Society is deeply appreciated! Many thanks to the physicians who contributed:

Bruce E. Baker, M.D.  
Robert A. Bornhurst, M.D.  
Duane M. Cady, M.D.  
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Gregory L. Eastwood, M.D.  
Rose N. Echeruo, M.D.  
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Nabila Elbadawi, M.D.  
Drs. Precha Paul & Sooky Emko  
The Farah Doctors  
Gianfranco Frittelli, M.D.  
Kenneth E. Gale, M.D.  
Joyce S. Garber, M.D.  
Aart Geurtsen, M.D.  
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Donald E. Milmore, M.D.
Stephen H. Mintz, M.D.
Ronald A. Naumann, M.D.
Dr. Dennis & Ann Nave
Patricia J. Numann, M.D.
Anis Obeid, M.D.
Lleni Pach, MD
Agnes Palocz, M.D.
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Robert S. Phillips, M.D.
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Joel Potash, M.D.
Daniel D. Rabuzzi, M.D.
Michael H. Ratner, M.D.
Nicholas M. Ricciardi, M.D.
Lewis Robinson, M.D.
Lorne A. Runge, M.D.
Jalal Sadrieh, M.D.
Robert H. Sagerman, M.D.
Joseph V. Scrivani, M.D.
Kendrick A. Sears, M.D.
Robert L. Slavens, M.D.
Harold Smulyan, M.D.
George A. Souferis, M.D.
George S. Starr, M.D.
John W. Stetson, M.D.
Arthur M. Stockman, M.D.
Edward D. Sugarman, M.D.
Sanford Temes, M.D.
Eduardo A. Tan, M.D.
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Most people would agree that getting the best medical care would be much easier if there was a way to connect all providers. Coordinating health information and ensuring your patients’ safety is complicated by multiple providers and tests and inefficient communications. At HealtheConnections, one of our goals is to bridge the healthcare information gap in healthcare for patients through the accessing, sharing, and exchanging of health information amongst the region’s connected healthcare delivery and support organizations.

You may have heard of us. We’re fully accredited by the NYS Department of Health and offer numerous free resources through the HIE that make it much easier for physicians, hospitals, public health and human services organizations, mental health professionals, insurers and consumers to collaborate for improved patient care, improved population health and lower health care costs. These services enable improved patient care and help to eliminate errors, repeated diagnostic testing, and medication concerns. HealtheConnections is able to facilitate the improvement of patient care and overall health of general populations, as well as help to lower the costs of healthcare for all.

It seems healthcare providers agree – HealtheConnections’ HIE grew exponentially in 2016, with providers utilizing more services than ever before throughout the Central New York area. New participants using HealtheConnection’s services grew by 27 percent, with nearly 700 users at year-end. These are your colleagues and partners in hospitals, independent practices, surgery centers, human services, and many more. In fact, 70 percent of regional providers are taking advantage of HIE services through HealtheConnections.

It’s one thing to have access to these resources, but it’s another to understand how to use them. HealtheConnections offers training and support at no cost to ensure that you’re able to integrate these tools into your everyday practice. That’s why we do what we do—to streamline your everyday workflow and improve efficiency, because we know that’s the best way to ensure you are able to provide the best care. Active users accessing the organization’s HIE portal grew by 63 percent last
year, with over 800 data sources available. They’ve taken advantage of tools like the
Patient Lookup feature that allows you to access important information through a
simple search, or the Image Exchange that negates the need for image disks.

There are 6 key services offered:

- **Patient Lookup**
  Real-time consolidated view of a patient’s community-wide health records

- **Image Exchange**
  Access to and viewing of diagnostics-quality radiology image studies

- **myAlerts**
  Patient activity notifications sent to providers for emergency department
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- **Direct Mail**
  Secure email system to communicate patient clinical information between
  healthcare professionals

- **Results Access & Delivery**
  Automated delivery of results, reports, and images through the HIE to a
  participant’s EHR

- **Query-Based Exchange**
  Access to outside record systems, including state, federal, and other external
  partners

Our active users have claimed amazing results through these tools. Obie Burger of
K&A Radiologic Technology Services is a frequent user, specifically of the Image
Exchange. “Since implementing Transfer-to- PACS, our workflow has become more
efficient than ever,” he says. “We can pull up prior results in the HIE and compare
them immediately to the new images—it must save me three hours per day.”

Patients are also on board with the services offered by HealtheConnections – 1.2
million patients throughout the Central New York area have provided consent for
the organization to share their information with authorized parties, up 20 percent.
By providing consent, patients grant participating healthcare professionals access
to their healthcare information if they need it, including test results, reducing the
potential for unnecessary and/or repeated tests, prevents confusion, and helps
avoid potentially catastrophic mistakes.

If you are interested in learning more about the resources available to you, visit our
website at [www.healtheconnections.org](http://www.healtheconnections.org). We’re here when you’re ready to make the
change to an easier, more efficient workflow.
Colorectal cancer is the second leading cause of cancer death in the U.S. among men and women combined (CDC, 2017). Between the years of 2010 and 2012, new cases of colon and rectum cancer were diagnosed at a rate of 40.5 per 100,000 Onondaga County residents (NYSDOH, 2010-2012).

The United States Preventive Services Task Force (USPSTF) has concluded that screening average-risk, asymptomatic adults aged 50 to 75 years for colorectal cancer is extremely beneficial and reduces mortality from this disease. There are multiple recommended screening methods available including high-sensitivity fecal occult blood testing, sigmoidoscopy, or colonoscopy. However, about one-third of eligible adults in the U.S. have never been screened for colorectal cancer. Offering education on all available screening methods is crucial in order to maximize the total number of adults who are screened for colorectal cancer.

All patients should be assessed for colorectal cancer risk during routine exams. For most adults, advancing age is the most important risk factor. A positive family history is linked to about 20% of colorectal cancer cases. It is recommended that patients with a family history of colorectal cancer start screening at a younger age and undergo screening by colonoscopy at more frequent intervals.

Colorectal cancer can be prevented through the removal of pre-cancerous polyps in the colon and/or rectum. As healthcare providers, it is important to refer your patients for their recommended colorectal cancer screenings.

The Onondaga County Health Department’s Cancer Services Program (CSP)
offers free colorectal cancer screening for men and women aged 50 to 64 who do not have health insurance or have other barriers to accessing screenings. The CSP provides a Fecal Immunochemical Test (FIT) Kit to average risk men and women for colorectal cancer screening. High risk (as determined by the New York State Department of Health Cancer Services Program) and symptomatic patients are referred for colonoscopy. The CSP also offers free breast and cervical screening for uninsured women aged 40 to 64. Please call 315-435-3653 for more information and to find out how to refer your uninsured patients for screening. Insured patients who are seeking colorectal cancer screening with their primary care provider are encouraged to check with their insurance company to determine which colorectal cancer screening method(s) are covered.

For more information on colorectal cancer screening recommendations, visit the United States Preventive Services Task Force (USPSTF) at https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/colorectal-cancer-screening2

“The United States Preventive Services Task Force (USPSTF) has concluded that screening average-risk, asymptomatic adults aged 50 to 75 years for colorectal cancer is extremely beneficial and reduces mortality from this disease.”
Onondaga County Cancer Services Program supports Colorectal Cancer Awareness Month!

Refer your uninsured patients aged 50-64 for FREE colorectal cancer screenings!

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ONONDAGA COUNTY MEDICAL SOCIETY

First-Quarter Activities

This year the Onondaga County Medical Society once again hosted both the Physician-Student Mixer and the Legislative Breakfast and Roundtable Discussion. Many thanks to those physicians and students who attended! Following are photos taken during these important collegial events:

*Brian Johnson, MD*

*Assemblyman Will Barclay and Onondaga County Commissioner of Health Indu Gupta, MD*

*2017 Legislative Breakfast and Roundtable Discussion*
OCMS President Dr. Mary Abdulky, Medical Student Representative David Distefano, and fellow medical students Marten Peterson (foreground) and Mike Bova at the OCMS Physician-Student Mixer

Dr. Richard Beers and Upstate medical student Liz Piotrowski

Physician-Medical Student Mixer at Faegan’s Pub
WELCOME
New Members

Scott Albert, MD
Dr. Scott Albert is an attending surgeon with the Upstate Department of Surgery, 750 East Adams St., Syracuse. He is board-certified in both general surgery and complex general surgical oncology. Dr. Albert completed a residency in surgery, as well as a surgical research fellowship, at Upstate Medical University. He also completed a surgical oncology fellowship at Ohio State University. He can be reached at the office, (315) 464-6274, or the clinic phone, (315) 464-8224.

LouAnne Giangreco, MD
Dr. LouAnne Giangreco is a board-certified physician specializing in Emergency Medicine. She is Chief Medical Officer of Five Star Urgent Care, which operates facilities in Cicero, Fairmount, Fayetteville, Liverpool, and Syracuse. Prior to that she was assistant director of the Emergency Department at Cayuga Medical Center in Ithaca, NY. Dr. Giangreco can be reached at (607) 543-1804.

Daniel Mendez, MD
Dr. Daniel Mendez has joined CNY Spine and Pain Medicine, LLC, at 7449 Morgan Road, Liverpool, NY. He is board-certified in physical medicine and rehabilitation and pain medicine, and specializes in pain management. He graduated from the Institute Tecnologico de Santo Domingo, and completed an internship in internal medicine at Nassau University Medical Center, where he also did his residency in
Physical Medicine & Rehabilitation and served as Chief Resident. Dr. Mendez can be reached at his office, (315) 451-5400, fax, (315) 451-5422. He is currently accepting new patients.

**Elizabeth Nguyen, MD**

Dr. Elizabeth Nguyen has joined Madison Irving Pediatrics, located at 475 Irving Ave., Ste. 210, in Syracuse. Dr. Nguyen received his MD from Upstate Medical University, and completed her pediatric residency at Rhode Island Hospital. She is board-certified in Pediatrics, and is currently accepting new patients. She is affiliated with Crouse Hospital. Dr. Nguyen can be reached at her office, (315) 471-2646, fax (315) 471-1762.

**Srinivas Paidy, MD**

Dr. Srinivas Paidy, a board-certified radiologist, has joined Prospect Hill Radiology. Dr. Paidy received his MD from Upstate Medical University, and completed a residency in radiology at Baystate Medical Center (Western campus of Tufts University School of Medicine), in Springfield, MA, as well as a residency in musculoskeletal radiology at University of Maryland Shock Trauma Medical Center. Dr. Paidy’s research, titled “AIRP Best Cases in Radiologic Pathologic Correlation Localized Amyloidosis of the Renal Pelvis,” was published in the November-December 2012 issue of RadioGraphics. Dr. Paidy can be reached at his office at 5100 W. Taft Road, Ste. 2A, in Liverpool, (315) 703-5117, fax (315) 703-5013. He is currently accepting new patients.

**Timothy Tramontana, MD**

Dr. Timothy Tramontana, a board-certified family medicine physician, has joined Fairgrounds Family Physicians group in Manlius, NY. Dr. Tramontana received his MD from Ross University, and completed his residency in Family Medicine at St. Joseph’s Hospital. He can be reached at his office located at 115 Fairgrounds Drive in Manlius, NY, (315) 682-6165. He is currently accepting new patients.
Beautiful Custom Home
The grand foyer boasts an elegant curved staircase. Dramatic two story great room features a stone fireplace that extends 2 stories to the balcony above. Fabulous gourmet eat-in kitchen. First floor grand master suite has his & her walk-in closets and bath with steam shower. Deck wraps around the back of house. $725,000

Stunning Classic
All the amenities for luxury living can be found in this classic beauty. Architect, Andy Rams-gard designed the blend of two units where new and old were tastefully combined in 2004. Walls of windows, stone and brick walls, hardwoods, custom moldings, baseboards & chair rails can be found throughout. $799,900

Timeless Beauty
Grand foyer opens to the well appointed interior. Stunning cherry paneled library and gourmet kitchen. Hearth warmed family/media room with wet bar. Six bedrooms and three full baths up. Remodeled lower level. Wine cellar & putting green. In-ground mineral pool, tennis court, & guest house. $1,199,900

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The Holiday Luncheon, chaired by Julia Nosovitch, was held at the Genesse Grande Hotel on December 7 in conjunction with the Alliance Day Project, chaired by Sherry Tyler, to benefit the Elmcrest Children’s Center. A total of $1,250 was raised in monetary donations, raffles and gifts for Elmcrest. Vendors at the Luncheon donated 10% of their profits. Raffle tickets for the Basket Raffle (valued at $1,000 with items donated by OCMSA members) were sold at the OCMS Annual Dinner in November and at the Holiday Luncheon where the winning ticket was drawn -- Dr. Ruth Hart was the winner. The Basket raised $1,000 toward scholarships. We thank all of those who participated. A Stickley rocking chair was donated by Stickley, Audi and Co. -- valued at $900 -- for a Silent Auction at the OCMS Annual Dinner. That was won by Dr. Ludwig Khoury of Jefferson County. In addition, an Art Sale of items donated and created by local physicians and their families was held at the Dinner and carried over to the Luncheon. The Sale raised $350. Our Holiday Ad had only about forty participants but raised nearly $1,000 for our Scholarship Fund. We thank those physicians who participated this year and encourage all physicians to take part in next year’s Ad. With the monies raised from these four fundraisers, we were able to add over $3,000 to our Scholarship Fund. If you would like to make a donation to our Scholarship Fund in memory of someone or in honor of someone, your contribution would be greatly appreciated. We receive about 60 applications each year from local schools for needy students requesting financial assistance in pursuit of their career in a field of medicine. We like to give six - eight scholarships each year so your generosity is greatly needed for 2017 -- and would be much appreciated for this year. Thank you.

Our Doctors’ Day event is scheduled for Wednesday, March 29 at Julie’s Place/Karen’s Catering and will begin at 6:00 PM. Please mark you calendars and plan to attend this fun evening honoring our area physicians for their dedication to their patients and to our community. During the evening, one of our local doctors will be presented with the Alliance’s advocacy award for his/her support of the Alliance. Invitations were sent out in mid-February.
For further information please contact Joan Cincotta at jmcincotta@aol.com or call at 315-446-5543. We hope to see many of you there as we celebrate you, the physician!

The *Think! Don’t Drink or Text!* campaign will begin in March with the mailing of 5,000 business-size cards to 50 area florists to be placed in flower boxes at prom time urging prom-goers to drive responsibly. This project is chaired by Donna LoDolce with assistance from Valerie Semeran and is gratefully underwritten by Dr. Robert Dracker.

Our *Spring Luncheon*, chaired by Julia Nosovitch and her committee: Sharon Cirincione, Kate McMahon and Val Semeran, is scheduled for Wednesday, May 17 at the *Skaneateles Country Club* beginning at 11:30. (A change of venue was necessary as the Craftsman Inn undergoes some major renovation.) The address for the Club is 3344 West Lake Street, Skaneateles, NY 13152 for those of you using GPS. Please mark your calendars and join us for a lovely few hours overlooking beautiful Skaneateles Lake. Scholarship winners will be announced, officers installed and a special guest speaker will present on a timely topic.

Scholarship applications will be sent to area high schools in March for needy students to apply for financial help as they seek careers in various fields of medicine. Donna LoDolce chairs this committee with the help of Val Semeran, Julia Nosovitch, Joan Cincotta, Sharon Cirincione and Regina Sheehan.

AMSSNY will be holding its Annual Meeting in Tarrytown, NY April 20-21 in conjunction with MSSNY’s HOD. **ALL** physician spouses are welcome to attend. Valerie Semeran will be attending from Onondaga County. For more information please contact Valerie.

Dues are currently due -- please send your check to Regina Sheehan by March 31st. Our next regular meeting will take place on Tuesday, March 28 at 1:00 PM at the Fayetteville Library. *Please note new day and time for meeting.*
How fitting it seemed to me to find the obituaries of Drs. Carl Austin and George Heitzman side by side in the Syracuse Post-Standard.

They were friends, classmates at Syracuse University, and, for many years, shared office space in the State Tower Building. Most significantly, through their years of practice at St. Joseph’s Hospital, Carl as an internist, and George as a cardiothoracic surgeon, they had a major impact on the quality of care delivered at that institution.

Their deaths affected me in a very personal way. I lost two colleagues who greatly influenced my professional life. In 1979, I went into solo practice as a general internist and entered into a call coverage arrangement with Carl and Ed Mullen. That allowed me inclusion in an informal group that would meet most mornings in the hospital coffee shop. In addition to Carl and Ed, the group at various times included Drs. Tom Gigantelli, Dick Weiskopf, Ernie Carhart, Jim Heitzman (George’s brother), Jack O’Brien, and when their operative schedules allowed, Art Vercillo, Sr., and George.

The number of attendees varied, but no matter how many showed up, only one pastry was bought to be divided among the group. (The religious overtones of this practice were not lost on me.)

The gathering encompassed many different personalities, but they shared a strong commitment to their patients, a great pride in their profession, and respect for their colleagues. There were no lectures or Power Point presentations, but medical matters were often discussed. There was praise for a colleague’s exemplary diagnosis or treatment, but criticism for actions they felt fell below
Their high standards. A physician’s conduct in the hospital, especially interaction with staff members, was often the subject to be vetted. I have no memory of monetary issues being a topic.

I could not help being profoundly affected by their opinions. When I went into practice, I thought I had a pretty good knowledge of medicine after residency, a year as chief resident and five years as a faculty member at Upstate Medical Center. That being said, as I have told many people, I really learned what it took to be a “physician” by sitting in the coffee shop at St. Joseph’s Hospital. I owe so much to those physicians, those mentors. Thank you all.

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In Memoriam

Carl I. Austin, MD

Carl I. Austin, M.D., 93, a life member of the Medical Society, died on December 29, 2016.

Dr. Austin attended Syracuse University before matriculating to The College of Medicine at Syracuse, where he was elected to the Alpha Omega Alpha Medical Honor Society. After full training and fellowship in pathology, he changed his medical practice to internal medicine in order to work with patients.

Dr. Austin served in private practice and at St. Joseph’s Hospital for more than forty years, and served as president of the medical staff and chairman of the department of medicine. He was a vocal champion of nurses throughout his career, frequently taking the opportunity to publicly praise the incomparable value of good nursing care.

He received numerous awards during his long medical career, including the inaugural Sister Patricia Ann Award, the Outstanding Clinician Teachers Award, and the Saint Joseph’s the Worker Award. After retiring from his clinical practice, Dr. Austin served as the first Coordinator of Medical Affairs (Medical Director) at St. Joseph’s Hospital Health Center, and continued his work as a clinician with the elderly at Crouse Community Center in Morrisville. He continued to be involved in administrative quality assurance at St. Joseph’s Hospital well into his eighties, and was active on boards involved in eldercare and home health care in his later years. He also chaired the Onondaga County Medical Society Retired Physicians luncheon meeting for many years.

Dr. Austin is survived by his wife of 65 years, Mary (Dwyer); six children, Mary Austin (Suzanne), Theresa Austin-Walter (Jeff), John Austin (Anne), Martha Austin, Ellen Austin-Li (Jolly), and Carl Austin (Barb); ten grandchildren; one great-grandchild; and numerous nieces and nephews.

Memorial donations may be made to the Dr. Carl I. Austin Memorial Nursing Scholarship in c/o the St. Joseph’s Health Foundation, 973 James St., Suite 250, 13203. Condolences can be expressed at http://fairchildmeech.com/tribute/details/174/Carl-Austin-M-D/obituary.html#tribute-start.
Kenneth E. Gale, MD

Kenneth E. Gale, MD, a prominent cancer surgeon in upstate New York for nearly 70 years, died on January 12, 2017. He was 95 years old.

Dr. Gale was admired and respected by his patients and colleagues for his intelligence, compassion and integrity and his relentless quest to improve the health care outcomes of patients suffering from breast cancer and melanoma. He participated in establishing the first ever oncology clinic in Syracuse, and pioneered the palliative treatment of metastatic cancer tumors through the use of hormone therapy. He was also an early researcher in cancer survivorship, helping to establish the first cancer registry program in upstate New York. This program collected stochastic data on patients throughout 15 counties who survived cancer treatment, and utilized this data to establish programs which improved patient care and survival rates for thousands of upstate New York cancer patients.

Dr. Gale was a well-known researcher, and published numerous articles and scientific papers detailing the results of his cancer research over the years, and was a frequent speaker at domestic and international cancer conferences, including the 11th International Cancer Congress in Florence, Italy. He was a member of the American Society of Clinical Oncology, the American Society of Breast Surgeons, the James Ewing Society of Surgical Oncology, the Cancer Liaison Fellow at the American College of Surgeons, a member of the International Association for Breast Cancer Research, and the former Chairman of the Cancer Committee of the Onondaga County Medical Society.

He graduated from Syracuse University and the Syracuse University College of Medicine, where he matriculated as part of the US Navy’s V-12 program during World War II. After completing residency at Michael Reese Hospital in Chicago and active duty service as a US Navy physician at the Brooklyn Navy Hospital and Halloran VA Hospital in Staten Island, Dr. Gale returned to Syracuse in 1948 to establish his private practice. He was affiliated with St. Joseph’s Hospital Health Center, Crouse Irving Memorial Hospital, Community General Hospital, and also an Associate Clinical Professor of Surgery at SUNY Upstate Medical University.

He is predeceased by his first wife Lois Arnold Gale and brother William S. Gale (Jean) of Cape Needick, ME. He is survived by his wife Catherine A. Gale of Manlius, NY, children Kathy Rocklin (Donald) of North Haven, CT; Frederick M. Gale (Cathy) of Boston, MA; Patricia Kigar (Daniel) of Ridgway, CO; Jacob D. Gale of Bangkok, Thailand; and Max D. Gale (Kristen) of
Cazenovia, NY; grandchildren Zachary Rocklin (Gabrielle) of New York, NY and Sharon, CT; Lucas Rocklin (Meredith) of Cheshire, CT; William Rocklin of Brooklyn, NY; Julianne Gale of Los Angeles CA; Jessalyn Gale of Chicago, IL; Jasmine Gale of Boston, MA; Samuel Kigar (Lila) of Ann Arbor, MI; Nathanial Gale of Cazenovia, NY; Ella Gale of Cazenovia NY; great grandchildren Noah and Eli Rocklin, and Shailesh Kigar; and several nephews.

Contributions in lieu of flowers may be made to the Gale Family Fund at CNY Community Foundation. Memories and condolences can be expressed at http://www.legacy.com/guestbooks/syracuse/kenneth-e-gale-condolences/183592650?cid=full.

**George C. Heitzman, Sr., MD**

George C. Heitzman, Sr., MD, of Fayetteville, who performed both the first coronary bypass operation and the first pacemaker implantation in Syracuse, passed away Thursday, Dec. 29, 2016. He was 93.

Dr. Heitzman was born and grew up in East Syracuse, the son of George and Katharine Cook Heitzman, graduating from East Syracuse High School, where he and his brother, the late E. James Heitzman, MD, played football. He graduated from the SU College of Medicine, now the Upstate College of Medicine, in 1947.

His medical training continued with an internship at Rhode Island Hospital in Providence from 1947-49, a residency in pathology at St. Luke’s Hospital in New York City from 1949-50, a residency in general surgery at Upstate Medical Center from 1950-53, service in the U.S. Army Medical Corps in France from 1953-55, a staff surgeon post at the VA Hospital in Iowa City, Iowa, in 1955, and a thoracic surgical residency at the National Jewish Hospital in Denver, Colo., 1955-57.

In 1958, Dr. Heitzman started the first open-heart surgery program at St. Joseph’s Hospital in Syracuse. In 1963, he implanted the first pacemaker in Syracuse, and in 1970 he performed the first coronary bypass in Syracuse. He practiced as a thoracic surgeon until his retirement in 1988.

A 2008 newspaper story “To Touch Hearts” offered a retrospective of his career, including some of the lives he saved, and helped inspire him to write a memoir that was published two years later: “For the Record, My Life as a Heart and Chest Surgeon.”
Dr. Heitzman’s career and pioneering work in open heart surgery were also profiled in a segment of NBC’s Today Show by Bob Dotson, author of “American Story, a Lifetime Search for Ordinary People Doing Extraordinary Things.” Dotson and his crew came to Dr. Heitzman’s home to interview him for the piece, which aired on Christmas morning 2014. The piece also showed Dr. Heitzman painting a picture; he was a gifted artist who studied under the noted portrait artist Joseph Kozlowski.

A life member of the Medical Society, Dr. Heitzman received the Distinguished Service Award from the Onondaga County Medical Society in 2015. He was also a member of the American Medical Association, the American College of Thoracic Surgeons and Phi Beta Kappa, the national honor society. He was a fellow of the American College of Cardiology.

Surviving are his wife of 36 years, Gina A. Heitzman of Fayetteville, and their son, Jacob Heitzman of San Antonio, Texas. Dr. Heitzman is also survived by his children from a previous marriage, George C. Heitzman, Jr., of Syracuse; Donna Heitzman of Syracuse; Peter J. Heitzman and his wife, Karen Savoca, of Munnsville; Jennifer Brown and her husband, Paul, of Cold Brook, NY; granddaughters, Eden Skowronski and her husband, Artur; and Jacqueline D’Ambrosio and her husband, Michael; three great-grandchildren, and several nieces and nephews.

Words of comfort may be expressed at http://www.tjpfuneralhome.com/obituaries/George-Heitzman-Sr/.

F. Deaver Thomas, M.D

F. Deaver Thomas, M.D., a life member of the Onondaga County Medical Society, passed away on February 8, 2017. He resided in the Syracuse area from 1970 to 2008, retiring in 2005 as Director of Nuclear Medicine at Upstate Medical University.

Dr. Thomas was a member of the Onondaga County Medical Society, the Society of Nuclear Medicine and the Thursday Night Club. He was an avid sailor, woodworker and skier and enjoyed playing the piano.

He leaves behind his wife, Mary Jean of 58 years, and sons, Deaver, Jr. (Susan) and Owen (Elizabeth).

Donations may be made to a charity of your choice.
Clear Communication is never more important than in the health care field. A misunderstood explanation or instructions for care could greatly alter a successful outcome for the patient and the facility.

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**PAIN MANAGEMENT, PALLIATIVE CARE & ADDICTION**

**A SERIES OF THREE WEBINARS**

Sponsored by the Medical Society of the State of New York & The New York State Office for Alcoholism and Substance Abuse Services

New York State requires that EVERY prescriber that holds a DEA license complete three hours of education every three years on addiction, pain management, and palliative care.

*Note: Coursework REQUIRED by July 1st, 2017*

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**Webinar 1: Thursday, March 9, 2017—7:30-8:30am**

**Understanding the Current Legal Landscape in New York State for Prescribing Controlled Substances**

(click to register)

**Faculty:** Patricia Bruckenthal, PhD, APRN-BS, FAAN & Trishia Allen, Esq.

**Educational Objectives:**

◆ Understand New York State and Federal Requirements for Prescribing Controlled Substances

◆ Discuss Guidelines for Chronic Pain

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**Webinar 2: Tuesday, March 14, 2017—7:30-8:30am**

**Rational Opioid Prescribing for Chronic Pain Conditions**

(click to register)

**Faculty:** Charles Argoff, MD & Patricia Bruckenthal, PhD, APRN-BS, FAAN

**Educational Objectives:**

◆ Discuss evidence based best practice recommendations for opioid therapy for chronic pain, patient risk assessments and documentation

◆ Describe palliative medical care and end-of-life care

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**Webinar 3: Tuesday, March 21, 2017—7:30-8:30am**

**Patients with Opioid Use Disorders: Identification, Treatment, and Management of Co-occurring Pain**

(click to register)

**Faculty:** Jeffrey Selzer, MD, Charles Morgan, MD & Frank Dowling, MD

**Educational Objectives:**

◆ Describe the Potential for Addiction, Patient Screening, Diagnosis and Subsequent Treatment or Referral.

◆ Recommend Tools to Assist in the Identification of High-Risk Patients for Whom Opioids are Indicated and Prescribed.

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**Registration FREE to MSSNY Members**

$50.00/course for Non-Members

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*Please note that issuance of free CME certificate will be based upon membership verification.*

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