

Philadelphia Medicine



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Are you ready to renew your license?

All physicians must renew their medical licenses in 2006. MDs must renew by December 31, while DOs' renewal cycle ends October 31. The Pennsylvania Medical Society and the Philadelphia County Medical Society want you to be aware of the basic regulations as well as the valuable resources and services that are available to physicians.

If you are an MD, to renew your license you must:

- Earn and be able to document 100 hours of CME
- 20 of those hours must be AMA PRA Category 1 Credits
- 12 of the 100 credits must be in either patient safety or risk management and can be either Category 1 or Category 2 credits.

If you are a DO, the following rules apply:

- You must earn and be able to document 100 hours of CME between November 1, 2004, and October 31, 2006.
- At least 20 of the 100 hours must be AOA Category 1A.
- Twelve of the 100 hours (either 1A or 2A) must be in patient safety or risk management.

A new publication from the Pennsylvania Medical Society, "Maintaining Your License to Practice Medicine," gives a quick but thorough synopsis of licensing requirements and rules for DOs and MDs. It's available only to members of the state and county societies, who can also contact the Society's licensing experts for individualized service.

The Philadelphia County Medical Society recently announced the availability of CMElectures.org/pcms, a series

of new web-based clinical seminars authored by some of Philadelphia's leading physician educators.

The 100+ lectures cover a broad spectrum of medical and surgical topics; their breadth and depth are unrivaled in online professional education. You can buy an annual subscription to CMElectures.org/pcms for a special introductory price of only \$9.95 a month. If you choose, you are welcome to review any three lectures at no cost before subscribing. We encourage you to check out the list of authors and the various topics by visiting the website at CMElectures.org/pcms.

The State Society also offers several options for earning credits to meet CME requirements. "Studies in Patient Safety: Online CME Cases" and "Domestic Violence: Screen to End Abuse" are online CME courses open to all physicians.

Many Members already receive *Consult*, which focuses on risk management; and *intouch*, a newsletter devoted to improving doctor-patient communication and relationships. All courses can be accessed at www.pamedsoc.org/cme.

In addition, members can use CME Tracker to enter AMA PRA Category 1 Credit, keep a log of Category 2 Credit, and monitor compliance with state and Society CME credit requirements. Tracker is available only to Pennsylvania Medical Society Members at www.pamedsoc.org/tracker. Tracker Companion is a convenient file organizer for CME documents from the current and previous medical licensing cycles.

Call (800) 228-7823 or use www.pamedsoc.org/store to order publications and products.

PCMS NEWS

Former PCMS President to focus on universal healthcare in Philadelphia



Enrique Hernandez, MD, PCMS Past President, has been named to represent the Philadelphia County Medical Society on the Development Working

Group (DWG) of the Health Leadership Partnership (HLP) by the City of Philadelphia Interim Health Commissioner Carmen Paris, MPH.

The DWG has been charged to start the process of forming an HLP which will design and implement a plan to ensure adequate healthcare for all in Philadelphia.

In November 2003 the voters of Philadelphia approved by a 3 to 1 margin a ballot referendum amending the Philadelphia Home Rule Charter stating that the City shall prepare a plan for universal healthcare that permits everyone in the City to obtain adequate healthcare.

The PCMS Website accepts typical classified ads. We also advertise upcoming events such as CME programs and seminars. Phone (215) 563-5343, Ext. 102 for more information.

Office Space Available

Up to 9,000 sq. ft. office space available. Parking included. Located in the attractive Art Museum area of Philadelphia. Contact: 215-563-5343, Ext. 101

Philadelphia Medicine

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In a letter to The Philadelphia Daily News Editorial Board (unpublished at the time we went to press), PCMS President Dell R. Burkey, MD, wrote:



In response to Ronnie Polaneczky's article "Docs should help Temple nurses," we doctors do care. We care about patient safety and quality healthcare. That is why we believe that it is imperative that Temple University Hospital and its nursing staff come to a resolution that is equitable for all.

Most importantly, this must happen quickly so that a walkout can be avoided. We do not support the idea of healthcare workers, including physicians, going on strike.

Physicians do appreciate the training and compassionate care provided by nurses. However, using patient-to-nurse staffing ratios to determine workload is not the sole gold standard. Other criteria, such as severity of patient disease, length of shift, and adequate nurse preparation are also important.

While a 4-to-1 patient to nurse staffing ratio may be appropriate in one section of a hospital, a 6-to-1 or even 2-to-1 ratio may be suitable for other patient care areas.

In a recent evidence-based analysis of nurse staffing and patient outcomes performed by nurses at the University of California, San Francisco (a state that does have mandated staffing ratios), varying staffing hours and providing the right staffing mix also contributed positively to patient satisfaction and safety. Ms. Polaneczky cites "studies" but does not reference them.

Once again, the vast majority of physicians deeply appreciate the outstanding contribution of their nursing colleagues in patient care. We object to the article's characterization of doctors and the oversimplification that legislating healthcare is the answer.



And in a second letter to The Philadelphia Inquirer Editorial Board, (also as yet unpublished), Dr. Burkey wrote:

We, as physicians responsible for caring for victims of handgun violence and seeing first hand the irreversible damage it does to lives, strongly support stricter laws limiting access to guns.

We respect the constitutional right to bear arms for self-protection, hunting or gun collection. Yet even now that right is not absolute. No one may swagger down the street into the local school with a machine gun or store sophisticated military weaponry in the backyard.

Reason and citizen safety govern our access to guns. The intended proscriptions should have minimal impact on the thousands of legitimate permit holders in the city and state. Limiting purchases to one handgun a month does not seem onerous. Other reasonable restrictions may be necessary to insure another right for ourselves and for our children – the right to live.

Many solutions are needed in Philadelphia, beginning with the people themselves, their values, home life, educational structure, adequate police protection, and judicial and prison reform. It is incumbent upon Philadelphia leaders to address these issues effectively and immediately.

Nevertheless, quick and easy access to guns is a major source of the violence epidemic. It may not be elsewhere, but it is in Philadelphia; and we must be able to take the necessary steps to reduce this particular cause of violence. Reasonable restraint, designed and implemented by elected Philadelphia officials, should be welcomed by all law abiding citizens.

We urge our elected officials in Harrisburg to defend aggressively our rights to bear arms, but also to recognize a special need to insure the life and safety of the innocent in Philadelphia. We do not want to tell another mother that her child has died as a result of a stray bullet from a gun whose trigger was pulled by a felon.

Independence Blue Cross new pharmacy benefits program estimated to lower drug costs \$100 million in 5 years

Aiming to control rising prescription drug costs, Independence Blue Cross (IBC) has started its own pharmacy benefits management company, called FutureScripts.

IBC expects the new initiative, which became effective Oct. 1, to lower its customers' drug costs by \$100 million over five years by negotiating better discounts with pharmaceutical manu-

facturers and improved reimbursement rates directly with pharmacies instead of contracting with an outside pharmacy benefit management company.

FutureScripts will operate as an IBC subsidiary, administering pharmacy benefits to about 1.2 million area members working for 48,000 employers, while Medicare Part D members will become part of the program Jan. 1.

Respiratory Syncytial Virus beginning to circulate

By Paul D. Siegel, MD

The Division of Disease Control, Philadelphia Department of Public Health, monitors circulation of common respiratory viruses from mid-September through late spring.

During the week of Sept. 18, RSV was identified in 12 clinical specimens, making it prudent to assume that RSV is beginning to circulate locally.

The virus has been implicated in severe illness in infants, especially those who are immunocompromised or have pulmonary disease. More recently severe respiratory illness has been noted in immunocompromised and elderly adults.

Contact precautions, hand hygiene, and respiratory precautions should be practiced when dealing with patients with severe respiratory tract infections.

Palivizumab, a monoclonal antibody (Synagis), and RSV Immune Globulin Intravenous (Respigam, RSV-IGIV) are licensed by the FDA for prevention of RSV in high-risk individuals. One should consider regional RSV activity when deciding whether to implement prophylaxis.

The Philadelphia Department of Public Health will provide regular summaries of respiratory virus transmission through the fall and winter months.

If you are confronted with a patient in whom prophylaxis may be indicated and wish to check regional

RSV activity, call the Division of Disease Control (215-685-6740) or check their website at www.phila.gov/health/units/ddc.

Dr. Siegel is a Past President of PCMS and a member of the Editorial Board.

CDC lowers recommended age for flu shots

Flu shots are now urged for kids up to age 5, as new Centers for Disease Control and Prevention guidelines target carriers to prevent spread.

The focus has been on the most vulnerable groups—the young and the old—while the focus now has shifted to groups that are most likely to contact and spread influenza to siblings, classmates, teachers, caregivers and parents.

Previously, the CDC recommended vaccinations for children age 6 to 23 months, while new vaccination candidates include children age 6 months to 5 years, healthcare workers, and people who live with or care for those considered high risk for flu related complications.

Host your event at PCMS

Host your next party or conference/seminar at PCMS headquarters. Ample free parking. Contact Louise Eder on 215-563-5343, ext. 107 to schedule an appointment.

Medicare benefits will see smallest premium increase in six years

Medicare beneficiaries next year will not see their premiums rise as much as originally thought because federal officials have downgraded their projections of how much physician care is costing the program.

The standard 2007 monthly premium for Medicare Part B, which covers outpatient physician care, will increase by \$5 to \$93.50—the smallest increase in six years—while the Centers for Medicare and Medicaid Services had previously estimated that the premium would jump by nearly \$10 to \$98.40.

CMS originally thought that the amount of services that doctors were billing was spiking, but now officials have realized that doctors simply were filing claims more efficiently and receiving payments more quickly, while the effect of the higher efficiency made it look to actuaries as if doctors were boosting the total level of care they were prescribing to their patients.

CMS said one of the biggest drivers for premium costs next year will not be office-based doctor care but hospital outpatient care, and it said many of the services that hospital outpatient departments are providing to beneficiaries could be accomplished for less expense and hassle in the physician office setting.

Increased spending on healthcare said to extend life expectancy

Healthcare spending may be soaring, but the increased outlays over the last 40 years are worth the price in terms of extended US life expectancy, according to a study published in the New England Journal of Medicine.

Researchers found that, on average, a person born in 1960 could expect to live 70 years, whereas someone born in 2000 has a life expectancy of 77 years; and while healthier behavior could account for longevity gains, researchers estimated that about half of the years gained—about 3.5—were directly due to medical care.

pcms people



William S. Frankl, MD, has been appointed to the PCMS Editorial Review Board. Dr. Frankl is a PCMS past president, past winner of the PCMS Strittmatter Award,

former First District Trustee and AMA Delegate in addition to his distinguished career as a cardiologist. Dr. Frankl has authored and published a novel and a collection of short stories, as well as many medical textbooks and papers.



Lillian H. Stern, MD, is the lead doctor for breast cancer and mammography at Methodist's Radiology Department, the first department in Pennsylvania

to use the Breast Specific Gamma Imaging (BSGI) camera. Dr. Stern says advantages of the BSGI are that it can detect smaller cancers and can help radiologists lessen chances of medical liability.



Robert T. Sataloff, MD, DMA, has been awarded the Pennsylvania Medical Society's highest honor, the Distinguished Service Award. To qualify for the award, a physician

must demonstrate a lifetime of significant achievement, as judged by peers. He becomes only the 21st Pennsylvania physician to win this high prestige award since it was first introduced in 1956. Dr. Sataloff joins Sheila Moriber Katz, MD, MBA, who won the award in 2005.

PCMS people wanted!

Your colleagues would like to know what you're up to. Send news about academic or other appointments, achievements, awards, promotions, etc., to Philadelphia Medicine 2100 Spring Garden Street Philadelphia, PA 19130



John Helwig, Jr., MD, died on October 1, 2006.

Dr. Helwig was president of PCMS from 1978 to 1979 during which time he appeared on a weekly program on WCAU/TV to discuss medical subjects. He was a member of the PMS Board of Trustees for nine years.

He headed the catheterization lab and then was associate director of the Cardiovascular Research Center at Penn before joining Germantown Hospital in 1965 where he was chief of the cardiology department for almost 30 years.

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