

FAMILY PHYSICIAN

An Official Publication of the Tennessee Academy of Family Physicians

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In Loving Memory of:



**J. Chris Graves, M.D.
2007 TAFP President-elect**



**T. Allen Polk, M.D.
2007 TAFP Vice Speaker**

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PLEASE SEND ADDRESS CHANGES TO:
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500 Wilson Pike Circle, Suite 212
Brentwood, Tennessee 37027

President's Corner



This edition of the Tennessee Academy of Family Physicians' quarterly journal is dedicated to Doctor Chris Graves who died as a result of a motor vehicle accident in November of 2006. Chris had been a member of the TAFP since he was a medical student, and in October 2006 was elected to the position of 2007 President-elect.

Chris' absence will leave a void in our organization that will not be easily filled. His wisdom, insight, and assessment of complex issues were invaluable to the TAFP and he challenged us to achieve the right decisions for the right reasons. Family physicians are unique among all specialties because of their relationship and advocacy skills, and in this area Chris was remarkable.

Above all, his love and commitment to students and residents were well known throughout the TAFP and it is only fitting that I honor him in this respect. As part of this issue of the journal, I have included an open letter sent to the Deans of the Medical Schools in Tennessee emphasizing the need to encourage more students to select family medicine as a specialty and calling. Additionally, I am hopeful the TAFP Foundation Board when they next meet will consider honoring Chris and his memory through establishment of a fund to provide additional support for TAFP student members wishing to attend the American Academy of Family Physicians' National Conference of Family Medicine Residents and Students which Chris so enjoyed.

Death is inevitable, but often times not understandable. In thinking about our loss, we must always be thankful for the privilege of knowing remarkable individuals such as Chris Graves, along with the contributions and meaning they gave to our lives. Great leaders of the TAFP such as Doctors Thomas Ballard, Oscar McCallum, John Derryberry, and now Chris Graves leave us a legacy to build on for the future.

**Charles A. Ball, M.D., Columbia
President**

Special Note: Since press time another TAFP leader sadly has passed; T. Allen Polk, M.D., Murfreesboro

LETTER SENT TO DEANS OF TENNESSEE MEDICAL SCHOOLS

November 30, 2006

As the newly elected 2007 President of the Tennessee Academy of Family Physicians (TAFP) and as a family physician in private practice in Columbia, Tennessee, I offer the opportunity to meet with you and discuss the importance of encouraging and fostering medical students to develop an interest and passion for the specialty of family medicine. Embedded in the university academic urban setting, students have a difficult time understanding and valuing the fullness and significance of this field of medicine.

The TAFP is the medical specialty association that represents family physicians, Family Medicine residents, and medical students interested in practicing Family Medicine throughout Tennessee, with a membership of 2,150. The TAFP is a state chapter of the American Academy of Family Physicians, which represents more than 93,500 members nationwide, headquartered in Leawood, Kansas. Family Physicians provide comprehensive, coordinated, and continuing care to all members of the family, and serve as the patient's advocate in the changing healthcare system. Family Physicians provide health maintenance and preventive services to each member of the family, regardless of sex, age, or type of problem. Our members are well-trained specialists that provide patient centered family care of medical, behavioral, social, and mental health disorders for all age ranges. According to national data, one out of every four patients is treated by a Family Physician.

Over the past few years, we have seen an alarming downward trend from medical students choosing family medicine as a specialty and career. According to the Robert Graham Center, which is sponsored by the American Academy of Family Physicians and functions to bring primary care perspectives to healthcare policy deliberations, there has been a 50% reduction of placement of US trained medical school seniors into primary care physician residencies. As a result, over the past six years at least twenty-five family medicine residency programs have closed, including the Baptist Healthplex in Memphis, Tennessee.

Coupled with these reports, it is now nationally recognized that the United States is experiencing a shortage of physicians overall, and without dramatic reversals in current training, this shortage will widen. A recent article in the Nashville *Tennessean* referred to a 2005 New England Journal of Medicine report that U.S. medical schools which graduate 25,000 students annually, need to train an extra 3,000-10,000 medical students per year to meet the needs of our expanding population. Using these statistics, the American Academy of Family Physicians projects the need for a 39% increase in the number of family physicians in Tennessee.

In 2004, the American Academy of Family Physicians produced the Future of Family Medicine; a dramatic proposal to provide a map and compass for the specialty of family medicine over the next ten to twenty years. The basic tenet of the paper is how family physicians in the healthcare system become patient centered, but most importantly, "that steps must be taken to ensure that every American has a personal medical home that serves as the focal point through which all individuals – regardless of age, sex, race, or socioeconomic status – receive a basket of acute, chronic, and preventive medical care services. Through their medical home, patients can be assured of care that is not only accessible but also accountable, comprehensive, integrated, patient-centered, safe, scientifically valid, and satisfying to both patients and their physicians."

In summary, I am confident that together we can engage this complex issue and reach the goal of comprehensive healthcare for all Americans with primary care and family medicine establishing the basis for these guiding principles.

I look forward to your response and an opportunity to discuss these vital issues.

Sincerely,

Charles A. Ball, M.D.
President

In Memory

Our great and good friend, Chris Graves, died November, 27, 2006, in an automobile accident. Chris was heavily involved with activities in the TAFP ever since he was a student at U.T. Memphis. His energy, enthusiasm, and talents led Chris to become one of our organization's most outspoken advocates for family medicine and all that the profession could be. His leadership was evident in the Tars Wars program, medical student and resident education support programs, and advocacy efforts of all stripes, including the recent successful effort to elect our Tennessee representative to the position of president of the AAFP. As a long standing member of the TAFP board of directors, a recent president of the TAFP's 3rd district chapter, and a long standing member of the TAFP congress of delegates, Chris's leadership was recognized by this assemblage of physician leaders by his election to the post of secretary treasurer. His current positions within the TAFP were as our President-elect, as a member of the Executive committee and of the Finance committee, as Chair of the Committee on Education, as Chair of the Nominating Committee, as member of the 2007 Assembly Program Committee, the Committee on Legislative and Governmental Affairs, and the Committee on Long Range Planning. He was a member of our Tennessee AFP Foundation Board, and he was the Tennessee AFP Representative to the Perinatal Advisory Committee for the Tennessee Department of Health. Soon he was to take office as our President of the TAFP. Truly he was a leader among leaders. We will not be able to replace him, as the remarkable person that he was or as the consummate professional and leader that he was.

It is difficult, to say the least, to try to make sense of the events that life throws your way. Hardships and bad outcomes in life have four origins. The first is a result of poor choices that we make in life. The second is a result of poor choices that others make that impact us. The third is a result of being in the wrong place at the wrong time. The fourth is a result of doing the right thing in service of family, God, or country, and being placed in harms way as a consequence.

I happily surrender to God the issue of "Why". But still, one strives for closure. One wishes to understand how events unfold in a particular manner. One wishes to establish ones place among humanity, and from that reference point, one hopes to establish a value-driven purpose and meaning to ones existence.

We often find ourselves looking for relief in expressions of God's grace – divine action that starts or stops cancer, creates or prevents floods, takes and gives life. Grace is an unexpected gift. Grace is free. It is not earned. The absence of grace is not a statement of moral depravity or anything moral at all. The

experience of grace is not a statement about righteousness. Anything free, loving, and kind is grace. And it is abundant. The life of Chris Graves was one such gift, and the loss of Chris was another. By losing something so precious, we can appreciate our loved ones, family and close friends, ever so much more keenly.

Poet Marilyn Chandler McEntyre tells us that Grace takes us by surprise. "It comes in odd packages. It sometimes looks like loss, or mistakes. It acts like rain. Or like a seed. It's both reliable and unpredictable. It's not what you are aiming at. Or, what you thought you deserved. It supplies what you need. Not necessarily what you want. It grows you up. And lets you be a child. It reminds you you're not in control. And not being in control is a form of freedom."

Chris was a gift of grace. We shall treasure always the memories of Chris. I know that I am better for having known him. I know that I carry a part of him with me. I know that I shall see him again. And although I find reasons to get up and go to work every day, I know that from this time forward I am living each day as if it could be my last. I am not looking to run off to Maui seeking silly pleasures. Rather I am looking to treat everyone I meet with the affection and respect that all people deserve. If I can be a kinder friend, a better husband, father, and grandfather, and the best physician that I can be for my patients, then perhaps my life, well lived, can be part of Chris's legacy.

To the extent that we maximize our relationship with others, that action can be described as God's love. This line of thinking gives the western world a concept of a compassionate kinship with all that is – a mutuality, a relatedness. Where love abides, God abides also. In so far as you weep and are moved to some action with others – no matter how tiny or insignificant – you are participating in this mutual activity which adds to a greater good. "The world breaks everyone," wrote Hemmingway, "and some are made strong at the broken places." "The heart that's broken," writes Maya Angelou, "can hold the whole room." When we practice the art of hospitality in whatever way we can, we transform the world. This, too, would not be an unfitting legacy for our dear colleague.

A more tangible legacy, however, is the move to rename the Third District "Choo Choo" Chapter of the TAFP to the Chris Graves Chapter. Chris shall forever be remembered in and by the organization to which he has given so much.

Presented by John Standridge, M.D. representing the TAFP; "J. Christopher Graves, M.D. Memorial Program, December 8, 2006, UT Chattanooga"

Call For Nominees

2007 'JOHN S. DERRYBERRY M.D. DISTINGUISHED SERVICE AWARD'

Nominations are being sought for the TAFP's 'John S. Derryberry M.D. Distinguished Service Award' by June 1, 2007. Nominations received should be for persons who deserve recognition of their outstanding service or contribution to the advancement of Family Medicine, to the Tennessee Academy of Family Physicians, or to the public welfare on Family Medicine's behalf, whether of a civic, scientific, or special service nature. This Award was established to recognize outstanding and distinguished service by a physician or by a non-physician demonstrating exemplary leadership, character, and/or dedication to community involvement. The Award is named in honor of the late John S. Derryberry, M.D., Shelbyville, who served the TAFP and AAFP with honor and distinction from 1964 until his passing in 1998, having served as AAFP President in 1979. **Nominees are NOT required to be members of the Tennessee AFP, but nominations must be made by a TAFP member in good standing.**

The following supporting data is required for each nominee:

- (1) A detailed statement of the scientific, cultural, or special service justification for the nomination.
- (2) Biographical information on the nominee including a recent black and white photograph.
- (3) Education and training of nominee.
- (4) Professional history, contributions to Family Medicine, special appointments.
- (5) Substantial evidence of merit including printed material, publications, articles, or other citations or relevant supporting documents.

The recipient will be selected by the TAFP Board of Directors at their summer meeting with the actual award to be presented during the TAFP's 59th Annual Scientific Assembly in Gatlinburg the week of October 30-November 2, 2007. To obtain a nomination packet, please contact the TAFP office at 1-800-897-5949 or by email at tnafp@bellsouth.net. Complete nomination packets must be received by the TAFP prior to June 1.

2007 'FAMILY PHYSICIAN OF THE YEAR AWARD'

The Tennessee Academy of Family Physicians is soliciting nominations for the TAFP 'Family Physician of the Year Award' with a deadline of June 1, 2007. The 2007 Family Physician of the Year will be selected by members of the TAFP Congress of Delegates voting through their Director on the TAFP Board of Directors at the Summer TAFP Board of Directors' Meeting.

The TAFP's 'Family Physician of the Year Award' honors a member of the TAFP who has made an outstanding contribution to Family Medicine, to the advancement of health and/or

medical training and medical education is eligible for nomination for this Award. All nominations must be submitted on an official nomination form available from the TAFP office. In addition to the completed nomination form, all nominations must be submitted with an updated curriculum-vitae, a current photograph of the nominee and you may include up to five (5) pages of additional supporting documentation such as personal letters or testimonials. All nominees **MUST** be a current member in good standing of the Tennessee Academy of

Family Physicians.

This is an opportune time to honor one of your colleagues! Consider submitting a nominee this year, or see that your TAFP chapter/district submits one. To receive a nomination packet, please contact the TAFP office at 1-800-897-5949, or by email: tnafp@bellsouth.net. Remember, the deadline for nominations for the 2007 TAFP 'Family Physician of the Year' is JUNE 1. Only nominations with complete nomination packets will be accepted, and no nomination materials will be accepted after June 1.

Leaders on the Move – Information for Members

• Effective January 31, 2007, please make note of the following new information for the Tennessee AFP office - address: 500 Wilson Pike Circle, Suite 212, Brentwood, TN 37027; new local phone number: 615-370-5144; new fax number: 615-370-5199; toll free number stays the same: 1-800-897-5949; email stays the same: tnafp@bellsouth.net.

• Congratulations to J. Mack Worthington, M.D., Chattanooga, for being appointed to the American Academy of Family Physicians' Delegation to the AMA for a two-year term for 2007 and 2008.

• Congratulations to TAFP Student member, Kelly McGuire of Johnson City, on appointment to the American AFP's Commission on Membership and Member Services.

• The TAFP is again providing the Doctor of the Day each Tuesday in 2007 to the Tennessee General Assembly. If you are interested in serving please contact Cathy at the TAFP office.

• Mark your calendar for the TAFP's Summer Weekend Seminar on June 22-23 at Pickwick State Park (see page 10 for preliminary program), and the TAFP's 59th Annual Scientific Assembly October 30-November 2 at the Gatlinburg Convention Center.

• Check out the TAFP's revised website at: www.tnafp.org

• The TAFP is ranked 11th in the statewide professional/trade associations in 2007 by the *Nashville Business Journal*. Associations are ranked by the number of members. The TAFP was also 11th in 2006.

PRACTICE OPPORTUNITIES

If you are looking for a partner or a practice location, send information by mail to: TAFP, 500 Wilson Pike Circle, Suite 212, Brentwood, TN 37027; or by fax to: 615-370-5199; or by email: tnafp@bellsouth.net. Information for practice opportunities will be accepted only from TAFP members and will be placed in the Tennessee Family Physician at no charge. You are required to include your name, address and/or telephone number and/or fax number and/or email address as contact concerning opportunities will be made directly between interested parties and not through the TAFP. Information will be placed in four (4) editions unless the TAFP is notified otherwise. **Deadline for the next issue (Summer 2007) is April 23.**

• The Department of Family and Community Medicine at Meharry Medical College is currently seeking a Board Certified Family physician to serve as full-time faculty. The position includes faculty appointments at Meharry Medical College and Vanderbilt University at the level of Assistant or Associate Professor depending on experience and qualifications. Previous academic experience, practice of non-operative obstetrics, or fellowship training is desired. Nashville is an excellent community and offers many amenities. The Department has eighteen Family Medicine Residents and also administers Preventive and Occupational Medicine Programs and The Center of Nutrition. Contact: Roger Zoorob, MD, MPH, FAAFP; Meharry-Vanderbilt Professor and Chair, Department of Family Medicine; 1005 Dr. D. B. Todd, Jr. Boulevard, Nashville,

Tennessee 37208; Office Phone: (615) 327-6572; Email: rzoorob@mmc.edu

• The Department of Family Medicine at the University of Tennessee in Memphis is seeking full-time family physician faculty. Positions involve the full spectrum of family medicine, including obstetrics with locations in multiple settings. Academic rank and salary are commensurate with qualifications and experience. Please send cover letter and CV to: Raymond R. Walker, M.D., M.B.A., Interim Chairman, Department of Family Medicine, University of Tennessee, 711 Jefferson Avenue, Suite 137, Memphis, Tennessee 38105. UT is an EEO/AA/Title VI/Title/Section 504/ADA/ADEA institution.

• Wanted: Nurse Practitioner or Physician Assistant. To work in a dynamic Family Practice clinic. Spanish skills helpful, but not mandatory. Competitive pay, flexible hours, full-time or part-time. Please call Dr. Laraya or Dr. Matt at 901-377-6805.

• Practice opportunity in Madisonville, Tennessee with the Tennessee State Department of Health. Great opportunity for qualified physician with regular hours. Contact: Tara Sturdivant, M.D.; Primary Care Services, 1522 Cherokee Trail, Knoxville, TN 37920.

• Full-time position for primary care physician as an employee of the health department. Position could be based in either Bedford [Shelbyville], Lawrence [Lawrenceburg], or Maury [Columbia] Counties. Contact Lang Smith, M.D. at lang.smith@state.tn.us or 931-490-8338.

REPORTS FROM STUDENTS ATTENDING 2006 AAFP NATIONAL CONFERENCE OF FAMILY MEDICINE RESIDENTS AND MEDICAL STUDENTS

I wanted to thank you again for the opportunity to attend the American Academy of Family Physicians' Conference of Family Medicine Residents and Medical Students.

This was my first time at the conference and I have to say that it was non-stop fun and excitement. There weren't enough hours in the day to take advantage of all the opportunities available. Shortly after my plan touched down I found myself face to face with Doctor Reid Blackwelder discussing the future of family medicine and our role and responsibility in that. I learned a lot of interesting facts about family medicine that both increased my love for family medicine and gave me a sense of pride about my new found career path.

I was able to attend the workshop "Applying to Residency: Preparing Your ERAS Application, Personal Statement and CV, and Surviving the Interview". This was probably the most beneficial session second only to the exhibit hall with all of the recruiters. This session provided some VERY useful tips that I will use in the very near future. It also motivated me to stop procrastinating and to get to writing.

The opening session speaker was Doctor Regina Benjamin from Bayou La Batre. She was both interesting with her many experiences as well as inspiring, reminding us what family medicine is all about. The night ended with a very nice opening social. And all of this was just the first day! The next two days were filled with similar sessions such as "Skin Problems and Their Not So Common Look A Likes", as well as "Chest X-ray Interpretation: A Simplified Approach" just to name a few. Even still, I spent the bulk of my time in the exhibit hall trying to navigate through the more than 400 booths attempting to make some decisions about the next phase of my training.

I have to say this conference was the best I have ever attended. It opened up a whole new realm of possibilities.

T. Renee Williams
Meharry Medical College, Nashville

I first want to thank the Tennessee Academy of Family Physicians for blessing me with the opportunity to attend the AAFP National Conference of Family Medicine Residents and Medical Students.

This was the first time that I attended the Conference and I thoroughly enjoyed all that it had to offer. I especially enjoyed and was moved by the lecture by Doctor Regina Benjamin. Hearing her story and listening to the passion and concern that she has in her heart for patients reaffirmed why I chose the field of family medicine. She has not allowed circumstances or adverse events to deter her from keeping in mind what's most important – the patients. I think that it is key in practicing good medicine to not only have the knowledge base but to also have care and concern for those you are trying to help. Doctor Benjamin reaffirmed this idea for me by discussing the importance of trust in the doctor-patient relationship. I truly believe that without trust, one will find it difficult to effectively treat patients and that is what she shared with us.

In addition, I found the lecture given by Doctor Stephen Jackson rewarding as well. Doctor Jackson encouraged us to not feel belittled when we are told that we are too good to be a family doctor. I have heard such remarks frequently since I have been on the wards and while I've always defended my decision and felt that good people need to become family doctors, I felt renewed by his uplifting words regarding this field of medicine. He stated family physicians are the future of medicine and there has to be a person who understands the whole picture of the patient in order to properly diagnose, refer and treat the patient. This discussion made me think that a patient may see a cardiologist for his heart but when the patient starts complaining of back pain who is there to start working on the path of diagnosis – the family physician. It's not until the family doctor has either diagnosed or moved beyond the basic steps of diagnosis that a surgeon will see the patient. Above all, the patient always ultimately comes back to the family doc for his or her overall health concerns regardless of what specific problem any specialist treats.

The workshops offered were great as well. I found the "Applying to Residency" workshop to be extremely helpful. I am now in the application process and I think that this workshop was extremely well put together. I received extra tips about what to include and not to include on both my CV and personal statement. The "Dental Emergencies" workshop was excellent as well and we are not

formally taught this in school. I think it is important to know how to handle the initial evaluation and understand the common problems in the event there is not a dentist available. We were given a handout which I will not be able to review and use during residency.

The residency fair was absolutely wonderful as well and is an invaluable tool for making my final list of residency programs to which I apply. I obtained information from many programs that I had never considered attending. It was great meeting people from the residencies I had on my preformed list of schools I plan to apply to. Meeting the residency directors and the residents provided several points of view of each residency program.

I am very thankful to the TAFP for providing me with the opportunity to experience this as well as all of the other unforgettable moments I had during the conference. I look forward to becoming a part of the elite group of doctors known as Family Physicians.

Crystal Antrease Smith
UT College of Medicine, Memphis

When I came to medical school my desire was to one day practice medicine overseas in an area where there is a lack of healthcare. This is still my desire. At first I thought that family medicine would be the ideal specialty to accomplish this goal, however after starting my clinical year, my opinion of family medicine started to waiver as those in academia tried to reduce family medicine physicians to nothing more than glorified nurse practitioners. I, too, was starting to change my opinion of family medicine and beginning to believe that it would not adequately prepare me to serve abroad until I went to the AAFP National Conference in Kansas City.

At the conference I heard story after story about family medicine physicians are working not only on improving the lives of their patients, but also improving their community as well, from helping Hurricane Katrina cleanup to volunteering at an inner-city medical clinic. The conference sessions allowed me to improve my skills such as reading chest x-rays and EKG's and it also allowed me to learn about opportunities in family medicine such as international rotations for medical students and fellowships for those finishing residency. The residency fair offered a myriad of opportunities to learn about family medicine programs around the country. I had the chance to meet several students and residents, and realized that family medicine physicians are not 'glorified nurse practitioners'.

They are a group of intelligent, compassionate

individuals whose goal as a physician is not just that of mastering a disease process or surgical technique. They try to treat all aspects of the patient, addressing their physical, social emotional and spiritual needs. They play an important role in healthcare from the small rural community to the urban city.

I am glad I was able to attend the AAFP Conference and to be reminded of the purpose and importance of family medicine.

Michele Gourley
ETSU Quillen College of Medicine, Johnson City

Thank you for your generous contribution to my medical education and decision making about future specialty by supporting my attendance at the AAFP's National Conference of Family Medicine Residents and Medical Students. I greatly appreciate the change to have gone to Kansas City and would not likely have been able to attend without your support.

My objectives for attending were to interact with students, residents and program directors excited about family medicine, learn about family medicine programs, and benefit from workshops offered. I felt like each of these goals were met. I am still deciding between Family Medicine, Med-Peds and Emergency Medicine. I enjoy the breadth that each specialty offers but have had a difficult time narrowing my decision. Though I highly value my education at Vanderbilt, I do not feel I have had adequate exposure to family medicine (and those interested in it). What I most enjoyed about the conference was speaking with residents about their reasons for choosing Family Medicine.

Exposure to vast numbers of residencies was extremely helpful. I have already perused the information from programs in locations that fit my geographic preferences for residents. I learned what typically constitutes a residency in family medicine – very broad with lots of procedures.

I enjoyed the workshops I attended. I was able to go to presentations on the financial aspects of residency and managing loans, prescription writing and management of lower back pain. The latter was exceptionally thorough and well taught.

The conference was as enjoyable as informative and I feel very grateful to have attended. I am still unsure about what my residency choice will be but I at least feel like I will be making a more insightful decision with respect to whether or not it will be family medicine.

Jeff Bontrager
Vanderbilt University School of Medicine, Nashville

CALL FOR RESEARCH PAPERS –

Deadline of July 15, 2007

The Research Committee of the Tennessee Academy of Family Physicians (TAFP) is pleased to announce the 'Call for Resident and Student Research Papers' for presentation at the 59th Annual Scientific Assembly to be held at the Gatlinburg Convention Center the week of October 30-November 2, 2007. Three abstracts will be selected by the TAFP Research Committee from those abstracts received for presentation at the TAFP's

2007 Annual Scientific Assembly. Those selected will have the opportunity to present their research paper to approximately 250 physicians from the mid-south who attend the TAFP's Annual Scientific Assembly. Those selected will receive up to two (2) night's lodging and paid car mileage.

Only TAFP Resident and Student members in good standing are eligible to participate in the TAFP Research Paper Competition.

If you are involved in research or other scholarly activities, the TAFP Research Committee would very much like to have you participate in this Research Paper Competition. If you have questions or wish to receive the required 'Competition Application' packet, please contact Cathy Dyer at the TAFP headquarters office at 1-800-897-5949, or by email at tnafp@bellsouth.net. The (firm) deadline for receipt of Research Abstracts is July 15.

RECAP OF OCTOBER 26, 2006 TAFP BOARD OF DIRECTORS' MEETING

- Received presentation on the Tennessee Rural Health Recruitment and Retention Center from Cindy Siler, Executive Director.
 - Received report that Doctor Charles Ball has been appointed to serve on the TennCare Medical Care Advisory Committee.
 - Announced the call for volunteers for the TAFP's Tuesday Doctor of the Day in 2007.
 - Reviewed request from the Society of Teachers of Family Medicine for financial support of their opening reception at the Annual Predoc Education Conference in Memphis January 25-28, 2007.
 - Declined offer to be involved with or provide donation to America on the Move in Tennessee noting the AAFP has its own program, AIM.
 - Discussed the American AFP Annual Meeting dates in 2012 and 2014 moving to the week prior to the Tennessee AFP Annual Meeting in October, with the AAFP ending on a Sunday and the TAFP beginning on a Monday.
 - Approved providing a listing of TAFP Active members with addresses to DeBusk College of Osteopathic Medicine for their use in contacting TAFP members for teaching and precepting.
 - Approved not hiring a Contract Lobbyists in 2007, but keeping the funding amount in the budget in 2007.
 - Voted to submit the nomination of Donald H. Polk, D.O., Waynesboro, for the AAFP's Family Physician of the Year.
- (For additional information on any of these items, please contact Cathy at the TAFP office.)*

DO YOU HAVE YOUR NATIONAL PROVIDER IDENTIFIER (NPI)

The purpose of the National Provider Identifier (NPI) is to uniquely identify a health care provider in standard transactions, such as health care claims. NPI's may also be used to identify health care providers on prescriptions, in internal files to link proprietary provider identification numbers and other information, in coordination of benefits between health plans, in patient medical record systems, in program integrity files, and in other ways. The Health Insurance Portability and Accountability Act (HIPAA) requires that covered entities use NPI's in standard transactions by the compliance dates. A physician or physician practice is a covered entity if it conducts any electronic transaction with federal health programs.

The compliance date for all covered entities except small health plans is May 23, 2007; the compliance date for small health plans is May 23, 2008. As of the compliance dates, the NPI will be the only health care provider identifier that can be used for identification purposes in standard transactions by covered entities. That means, as of May 23, 2007, all physicians MUST

submit the NPI number on their claims. Failure to do so may mean the inability to claim and receive payment for services rendered on or after that date. It is important to begin submitting the NPI now while there is time to correct any problems within the billing system or clearinghouse. Members should submit both their current provider identification (legacy) numbers and their NPI at this time.

Getting ready for the NPI is a two-step process:

1. Apply for your number from CMS,
2. Share your NPI with all insurance carriers with whom you do business.

If you do not have an NPI, learn how to apply by visiting the Centers for Medicare and Medicaid Services (CMS) Web site, www.cms.hhs.gov.

Additionally, Academy members who want more information on the NPI and how to obtain one can access that information on the AAFP website at: <http://www.aafp.org/online/en/home/practicemgt/regulatory-compliance/hipaa/natlproviderid.html>

Date: February 6, 2007

Subject: National Provider Identifier (NPI) Collection Process from Medicaid Providers
To: Medicaid Providers

The Bureau of TennCare (TennCare) is ensuring compliance with the federal regulation 45 CFR 162 that states that healthcare providers obtain a unique and permanent provider identifier by May 23, 2007.

TennCare is urging providers to obtain their NPI and register it with TennCare as quickly as possible. The timely collection of NPIs for Medicaid providers will ensure the ease of claims payment after the May 23, 2007 CMS deadline. Therefore, the delay in registering the NPI with TennCare may hinder a timely claims payment process.

Your current provider number cannot be used after May 23, 2007 for payment. TennCare policy requires the use of NPI on all electronic and paper transactions (UB-04, CMS 1500 and Dental) and will follow the proposed Medicare implementation timeline.

How is an NPI obtained?

National Plan and Provider Enumeration System (NPPES)

- On-line: <https://nppes.cms.hhs.gov/>
- By phone: 1-800-465-3203

How to register your NPI with TennCare:

- TennCare is now collecting NPIs from health care providers who are not enrolled in one or more of the TennCare managed care health plans. If you are enrolled with a Managed Care Contractor, please submit your NPI to the appropriate provider service representative.
- Once you obtain your NPI, the information can be submitted to TennCare by:

Fax: 615-741-0028; or,

Mail: Provider Enrollment Attn: NPI Collection
310 Great Circle Road, Nashville, TN 37243-1700

Annual Summer Weekend Seminar

Watch your mail in March for the TAFP Summer Seminar Program along with Room Reservation & Registration forms; or check the TAFP website: www.tnafp.org

'Preliminary' ANNUAL SUMMER WEEKEND SEMINAR

Tennessee Academy of Family Physicians
Pickwick Landing State Park, June 21-24, 2007

Thursday, June 21

12:00 noon Golf Tournament – TAFP Foundation Fund Raiser for Tar Wars in Tennessee (lunch included)

Friday, June 22

- 8:00 a.m. "Pandemic Flu and the Tennessee Department of Health's Pandemic Response Plan" – Allen Craig, M.D., Nashville, TN
- 9:00 a.m. "Homeland Security & Disaster Planning" – Michael W. Proctor, M.D., Houston, TX
- 10:00 a.m. *Break*
- 10:15 a.m. "Katrina Disasters: What We Have Learned" – Michael W. Proctor, M.D., Houston, TX
- 11:15 a.m. "Summer Illness: Viral vs. Tick vs. Other" – Tim Jones M.D., Nashville, TN
- 12:15 p.m. Adjournment of Scientific Program for Day (*Lunch-On-Your-Own*)
- 1:30 p.m. *Tour of Shiloh National Park*
- 7:00 p.m. *Group Cookout*

Saturday, June 23

- 8:00 a.m. "Methamphetamine Use in Tennessee" – Michael Revelle, M.D., Jackson, TN
- 9:00 a.m. "Meth Destroys Panel" – One or Two former Meth Users thru MethFreeTN; District Attorney and/or Local Law Enforcement
- 10:30 a.m. *Break*
- 10:45 a.m. "Lessons from the War in Iraq and Illnesses that May Present with Overseas Travelers" – Michael Revelle, M.D., Jackson, TN
- 11:45 a.m. "What Drug Screens Can Do for You and How to Interpret: Can an MRO Help You?" – Tim Linder, M.D., Selmer, TN
- 12:45 p.m. Adjournment of Scientific Program for Day (*Lunch-On-Your-Own*)
Afternoon & Evening Free

Sunday, June 24

- 8:30 a.m. TAFP Board of Directors' Meeting

CALL FOR CONSTITUTION & BYLAWS AMENDMENTS

Pursuant to Article X of the TAFP Constitution & Bylaws, "An amendment to the Constitution & Bylaws may be proposed by any regularly appointed committee of this Academy or by any five (5) or more members. The proposed amendment(s) must be submitted to the Executive Director of the Academy no less than 100 days prior to the meeting in which the proposed amendment(s) is to be considered."

"...notice of such proposed amendments to be made to members of the Academy by the Executive Director at least 30 days before the meeting at which such proposed amendments are to be acted upon. Publication of proposed amendments in the official publication of the Academy shall be sufficient to constitute notice thereof to the members".

Proposed amendments to the TAFP Constitution & Bylaws must be received by the TAFP office by July 15, 2007, and will be published in the Fall issue of the TAFP's quarterly journal; 'Tennessee Family Physician'.

2007 DEADLINES FOR THE TAFP QUARTERLY JOURNAL:

Summer 2007 – Deadline of April 23
(publication date first of June)

Fall 2007 – Deadline of July 20
(publication date first of September)

Winter 2007 – Deadline of October 23
(publication date first of December)

Your submissions are welcome for review by the journal co-editors for consideration of publication. Submissions should be provided to the TAFP single spaced on a disk or as an email attachment in MSWord format if at all possible.

If you have articles, information, letters to the editors or submissions for the TAFP quarterly journal, please forward to: Cathy Dyer, TAFP – By Mail: 500 Wilson Pike Circle, Suite 212, Brentwood, TN 37027. Or, By Email: tnafp@bellsouth.net.



About Ready, Set, FIT!

Ready, Set, FIT! offers skills-based lessons and activities encouraging students to "be active, eat smart, and feel good." Through a partnership between the American Academy of Family Physicians' fitness initiative, Americans In Motion (AIM) and Scholastic, *Ready, Set, FIT!* is an education program that teaches third and fourth graders about balancing fitness through:



physical activity



nutrition



emotional well-being

About the Program

Aligned with national education standards, the program builds on core language arts, math, and health skills.

In the Classroom

Ready, Set, FIT! is packaged in a classroom kit including:

- a teaching guide
- student guides
- in-class worksheets
- classroom posters

Teachers will be asked to administer a pre- and post-assessment quiz to gauge students' knowledge about fitness. Teachers who report these results and complete a feedback survey will receive fitness incentives for their students and a *Ready, Set, FIT!* classroom certificate.

In the Community

Family physicians are valuable community resources and role models for addressing personal fitness. Teachers are encouraged to invite a family physician to help kick off the learning experience. Together, teachers and family physicians can help children recognize the importance of family physicians and everyday choices individuals make to "be active, eat smart, and feel good."

At Home

The learning experience also extends from the classroom to the home. Students receive a guide with take-home assignments designed to engage family conversations about fitness choices.

Fitness is made up of three important parts.

Try to have a balanced day, every day.



Now Available!

The program materials are available at www.readysetfit.org. A limited quantity of program kits have been distributed to select third and fourth grade teachers in Alabama, Delaware, the District of Columbia, Florida, Georgia, Indiana, Louisiana, Mississippi, New Jersey, and South Carolina. All other teachers and interested parties are invited to download the materials from www.readysetfit.org.

Ready, Set, FIT!

Contact Information

Web site: www.readysetfit.org

E-mail: readysetfit@aafp.org

Phone: 1-888-KID-4AIM



Ready, Set, FIT! is brought to you by Americans In Motion (AIM). AIM is sponsored by the American Academy of Family Physicians and is supported by educational grants provided by core supporters. A listing of AIM's current supporters can be found at www.americansinmotion.org.

Chris Graves – my friend...

“T hough we share this humble path alone, how fragile is the heart. Oh, give these clay feet wings to fly to touch the face of the stars. Breathe life into this feeble heart, lift this mortal veil of fear. Take these crumbled hopes, etched with tears. We'll rise above these earthly cares. Cast your eyes on the ocean. Cast your soul to the sea. When the dark night seems endless, please remember me. Please remember me.” - Loreena McKennitt, “Dante's Prayer,” The Book of Secrets, 1997.



The House of Family Medicine is silent in this hour with the passing of one of our own. A pillar of strength falls unexpectedly and we all pause to note the shift in our foundation. We mourn the loss of anticipated leadership, stamina, and vision.

Those who worked with

him daily knew the depth of tragedy instantly. The rest of us will learn in the coming months and years why we pushed him forward into our Academy to the level of President-elect. Chris Graves was Family Medicine in the broad sense. He practiced, he taught, and he gave back to the profession he loved. I hold the smile and the laugh tight in memory clinging to sight and sound of his youth and vitality. He touched everyone in the Tennessee Academy of Family Physicians.

Early in my career, the death of physicians in my community was far too common an event. It began for me with the passing of Bass Cowles, M.D. who attended Tusculum College with my parents. The succession of deaths in the next five years was dramatic. Charles McGaw, M.D. and I were pressed into service from Laughlin Hospital Emergency Room practice sooner than anticipated by the illnesses of two physicians. First it was the shocking diagnosis of oat cell carcinoma in the robust Atlee Cooper, M.D. He was one of the busiest young general practitioners in Greeneville and had just stopped delivering babies. Then his senior partner, Hal Henard, M.D., was admitted with a perforated colon from an obstructing

carcinoma. He twisted the surgeon's arm into a primary reanastomosis thereby avoiding a colostomy. Although Doctor Henard was back at the office in weeks, Doctor Cooper succumbed to the ravages of his metastatic disease in less than one year. Inside that year, Doctor Henard sprouted a second primary from the lung and was taken down by this tumor in several months. My mentor and my mother's physician in her pregnancy with me was no more. Charles and I hit the ground running with a full office practice in the place of two seasoned general practitioners. We joined Nathan Horner, M.D. who was the sole remaining member of a four-man group in downtown Greeneville.

Robert Brown, M.D. was Doctor Cowles partner and fell prey to the genetic predilection for coronary thrombosis in his family by passing in his sleep. Haskell McCollum, M.D. had retired from our office practice from cancer of the lung with cerebral metastasis before Charles and I came to work. Doctor McCollum still came for coffee and tales of patient care and to get out of the house. But he also fell to the progression of disease. I continued part time emergency room work and shared duties with Darrel Slagle, M.D. I rode with him to Dayton TN one Saturday morning in UT Football season. The vehicle was Darrel's sport helicopter and the trip was amazing in speed and not at all like plane travel. We landed in the clinic parking lot in Dayton and he dropped me off in the intersection in front of my parent's home in Rockford. Dad's neighbors considered an ordinance against such landings for the future. Darrel died in his helicopter. He left Greeneville one rainy February evening in an ill advised attempt to fly by instruments in a fog shrouded

mist to keep a date with his girlfriend in Knoxville. The number of funerals we were attending astounded Charles and me.

We endured and fell into the pace of practice. Charles was an equally diligent worker and we quickly had all we could endure in the office and dropped the emergency room shifts. I noted that Charles fretted too much over a few seemingly harmless smudge cells in his son's CBC drawn in a febrile illness. It finally made sense when Charles took leave for an MD Anderson consultation for his chronic lymphocytic leukemia. What would have been an indolent illness for a healthy man but it was not to be so. Within a few short years he became ill and then could not keep up an office schedule. He died over a decade ago and left us all shaken with the loss. His daughter precepted with me this past summer. Memories and emotions of those traumatic days welled up once again. I had delivered Elizabeth McGaw and now 21 years later, I'm watching Charles' daughter ponder medicine as her future. We were all members of Asbury United Methodist Church. I delivered his eulogy. I asked for the honor. I have not been in

that situation since.

But it is the loss of our younger colleagues that captures the soul. It is though we sacrifice part of ourselves in the fear that it could just as easily have been us who became ill or sat behind the wheel at the right moment in time to meet our end. We rarely stare our mortality in the face long enough to soak in the consequence of stepping into the next realm. We are stopped by causal event and its trauma. I find it more tolerable to consider an after life in my sixth decade than when in my fourth. I'm not wiser; I'm just that tired and have seen so much of bodily suffering and frailty to consider death a relief from the travails around me.

Chris' life was full with dedication to the task at hand. We were privileged to have part of it shared individually and as a specialty. Few stars illuminate so brightly such that we can pause to look within, measure ourselves, and hope we have done as well.

Good rest gentle soul. "When the dark night seems endless, please remember me."

**Mike Hartsell, M.D., Greeneville
Co-Editor**

T. Allen Polk.....another friend lost.....

Since press time, another leader in our Tennessee Academy has passed. T. Allen Polk, M.D. of Murfreesboro succumbed to a long illness. He served his component chapter and represented his constituents on the Board of the TAFP for almost two decades.

His representation on the TAFP Legislative Committee was instrumental in successful dialogue and negotiation with the Tennessee Chiropractic Association in 1997.

T. Allen, as he was known, impressed most of us with his gentle manner. He brought great power to the table in meetings by speaking so succinctly. He touched the lives of colleagues just as he did those of patients.

He graced us with his presence as our Vice Speaker to the Congress of Delegates in Gatlinburg this past October. The standing ovation was spontaneous. We knew he wanted to join us one last time and see those

he had come to love. Doctor Polk became a family physician as a second profession. He had enjoyed success as a chiropractor in Florida and served the University of Florida Gators football team. But Tennessee called to him and he returned and fought the odds to change gears to medicine. He distinguished himself in practice by advocating for his patients, representing his specialty, and serving wherever there was a need. He made a profound difference in the lives of those for whom he cared.

T. Allen Polk, M.D. was prevented from becoming TAFP President from middle Tennessee due to his illness. Leadership came easily to him. We are saddened by this loss and strengthened by the depth of his faith and witness.

**Mike Hartsell, M.D.
Co-Editor**

YOU'VE BUILT A PRACTICE.



We've built the structure to protect it.

There are powerful forces in the marketplace. Events that can undermine in a day what you've labored years to create. That's why, over the past 30 years, we've cemented our partnerships with you, our physician owners. Together, we've assembled an industry-leading framework of medical malpractice coverage, counsel and support. We've molded the most comprehensive risk management and business resources program in sight. And we'll keep on engineering better services. To fortify your practice. And reinforce its development. Choose SVMIC. Because with the right partner, the sky's the limit.



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