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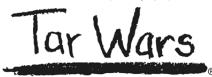
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ILLINOIS FAMILY PHYSICIAN

Published by the Illinois Academy of Family Physicians Editor – Ginnie Flynn | gflynn@iafp.com | 630-427-8004



A tobacco-free education program for kids from the American Academy of Family Physicians

Mummy said not to smoke!

Courtney Monier, a fifth-grader at LeRoy Elementary, knows how to get her "don't smoke" message across. She designed the winning poster in the Family Health Foundation of Illinois Tar Wars Poster Contest, held April 21 at the Illinois State Capitol. Courtney's "Mummy said not to smoke" poster beat out 22 other finalists. Fifty-four Capitol staff and visitors cast a vote, evaluating the posters on creativity and positive message about being smokefree. IAFP board member Janet Albers, MD of Springfield announced the winners at the Capitol that afternoon.

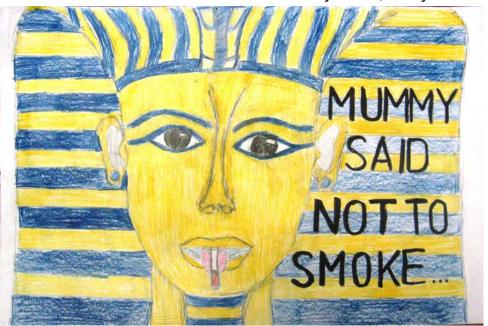
Monier will represent Illinois at the National Tar Wars Poster Contest July 13-14 in Washington, D.C.

Carolyn Rutherford of the McLean County Health Department taught Tar Wars at LeRoy Elementary. She and fellow health educator Jackie Lanier teach Tar Wars to schools throughout the county. Their outstanding efforts over the past 9 years have produced several state poster contest winners and runners up. More than 20 of McLean County's top Tar Wars posters will be displayed on billboards throughout the county over the next few months.

In the current school year, over 180 healthcare professionals and medical students taught Tar Wars to over 270 elementary schools across the state. Tar Wars presenters include family physicians, residents, medical students, health educators, nurses, social workers and teachers, all united with the

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2009 Illinois State Poster Contest Winner: Courtney Monier, Le Roy.



President's Message

The lobbyist lives in each of us!

I have been actively meeting with state and federal lawmakers for more than 15 years now. While I was a Primary Care Policy Fellow with DHHS, I wore my family physician hat which means I had plenty to talk about! We (fellows) covered the gamut of issues important to family medicine and primary care – disease prevention, eliminating disparities, funding pipeline programs, boosting the workforce and passing tort reform. Our messages were on-target and important for the health of the people we care for and for the colleagues we represented.

Fast forward to today – I have many opportunities through IAFP and AAFP,



as well as through my activity with the Cook County Physicians Association and the National Medical Association to advocate to state and federal lawmakers at home, in Springfield and in Washington, DC. I cannot understate the importance of our role and duty to advocate for our profession and the communities we serve. Do I/we get tired? Maybe! But if not us, then who?

Spring into Action Success!

During March and early April, many IAFP members made personal visits to

Springfield for the "Spring into Action" legislative visits. Be sure to read about our five stellar days in Springfield beginning on page 10. My day in Springfield, March 31, was an extraordinary experience. It was a very busy day in the Capitol, bills were moving fast and legislators were moving even faster! But with great planning, some tenacity and a little luck, I was able to speak with many legislators on your behalf that day. Also, the IAFP leadership contingent with me that day had a very productive meeting with Carolyn Brown Hodge, the deputy chief of staff for Gov. Pat Quinn. It was a tremendous opportunity to introduce the Academy and share our family medicine priorities with the Governor's office.

IAFP had such an outstanding impact over those five days. The bills we advocated for passed out of the House or Senate, so they continue through the legislative process in the second half of session. Our first- time attendees had wonderfully positive interactions with lawmakers. We had a fantastic group of resident members who successfully

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President's Message

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advocated to their lawmakers on March 18th. University of Illinois – Peoria medical student Nicole Kennedy joined her preceptor, IAFP Board Chair Steve Knight, MD for the Academy's last Spring into Action day on April 2. It's never too early to learn how to lobby!

Our lobbying agenda was short, but realistic. We stuck to core family medicine policies and programming that is fiscally responsible in this current economic recession. Specifically, we focused on expedited partner therapy (EPT) for treating STDs, raising the cigarette tax to reduce smoking rates, and keeping people safe on the roads by outlawing texting while driving.

I want to thank all the members who participated. This five-day format allowed IAFP to have a constant presence and a lasting influence over the process. This system is working well, and we plan to stick with it. So, when the Spring into Action dates for 2010 are posted, please pencil in one day on your calendar and plan to join us!

A Look at Federal Advocacy

2009 could be the year for true federal health care transformation and I'm excited to head to Capitol Hill to talk about it! As you know, AAFP priorities include implementing and funding the Patient Centered Medical Home, as well as reinventing the entire Medicare physician payment structure to better pay primary care for the services we provide.

AAFP Delegate Ellen Brull, MD and I both serve on the AAFP Commission on Governmental Advocacy. Not only can we represent you, but we are constantly updated on the tremendous work AAFP does to keep the family medicine priorities in front of Congress. Recent hearings on Capitol Hill focusing on health care reform demonstrate that members of Congress understand the issues and are actively supporting primary care.

For example, the House Energy and Commerce Subcommittee on Health held its third health reform hearing on March 24. This hearing concerned racial, ethnic, and geographic disparities in access to health care, and the role of the health care workforce in addressing these disparities, with particular emphasis on primary care and nursing.

At the hearing, the Committee Chairman, Rep. Henry A. Waxman (D-CA), said that health care reform must provide for not only universal coverage but also more primary care doctors and nurses to ensure that an insurance card actually gives the holder access to treatment. The Subcommittee Chairman, Rep. Frank Pallone (D-NJ), concurred about the need for more primary care physicians and pointed out that two-thirds of the physician workforce practice as specialists and the number of young physicians entering primary care fields is declining.

George Washington University professor Fitzhugh Mullan testified that "hard work, low pay and 'lifestyle' expectations of medical graduates today have resulted in dramatic reductions in interest in primary care in U.S. medical graduates." He noted that the number of doctors overall in the United States is roughly what it should be but that geographic distribution is poor. Title VII programs under the Public Health Service Act should be "reinvented and reinvigorated," to create "incentives and educational pathways that will select and train students for primary care, rural health, diversity and social mission."

Illinois' own Jerry Kruse, MD testified before a House subcommittee on March 18 to advocate for increased funding toward primary care training programs. You can read more about his experience and link to his testimony on page 12.

How can FM make a difference here at home

You don't have to fly to DC to make an impact on federal policy. Building relationships with your lawmakers is important. We have a great opportunity in Illinois with four new U.S. Representatives in Congress. Former Cook County Commissioner Mike Quigley was elected to fill Rahm Emanuel's 5th District Seat (see page 13 for more information), Debbie Halvorsen is the new rep for the 11th

District, Aaron Schock replaced Ray LaHood in the 18th District (Mr. LaHood is now U.S. Secretary of Transportation) and Bill Foster was re-elected to the 14th District vacated by Dennis Hastert. If you live in those Congressional districts, attend a public function for your Representative. Invite him or her to visit your practice. Contact the district office and schedule a meeting during one of the District Work Periods. Share your concerns about our health care system, the solutions provided by family medicine and offer yourself as a resource to him or her on health care policy.

Supporting FamMed PAC benefits IAFP!

Supporting the AAFP's FamMedPAC is supporting family medicine. Here in Illinois, our support of the PAC ensures IAFP leaders get valuable face time with our members in Congress. Board chair Dr. Steven Knight recently invited Rep. John Shimkus (R-IL) to visit his clinic and delivered a FamMedPAC contribution to him. Rep. Shimkus spent a lot of time at the practice that day talking with Dr. Knight, his colleagues and staff. We have had other opportunities to personally deliver a PAC contribution and deliver important messages about family medicine during those visits. If all AAFP members would consider donating just \$30 a month, we'd hold the same influence as some of the largest PACs in the nation and could truly represent primary care. Would you consider contributing, or increasing your annual contribution? Learn more on page 13 or link directly to AAFP FamMedPAC.

Now we're energized and heading to Washington, DC – to represent you at the Family Medicine Congressional Conference. AAFP reports that they have the highest registration ever for this event, with Illinois strongly represented by our largest delegation ever –27 members and counting! Your IAFP board of directors will meet face-to-face on Tuesday, May 19th. We'll be taking your message with us to Capitol Hill on Thursday, May 21. I look forward to reporting back to you about our experiences there in future IAFP communications.

Stay tuned and stay healthy!

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common mission of keeping our kids tobacco-free.

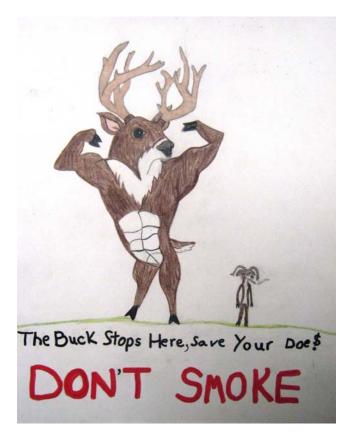
Volunteer efforts like Tar Wars are making a big difference in a state that does not adequately fund tobacco prevention and cessation efforts. In 1999, 34 percent of Illinois teens were tobacco users. Today the state's high school smoking rate is down to 19.9 percent, according to the Campaign for Tobacco Free Kids.

All 23 state poster contest finalists will receive a prize pack, including a certificate and, Tar Wars T-shirt, along with pencils and jump ropes donated by the Midwest Dairy Council.

Don't forget about Tar Wars night with the Chicago White Sox!
Order your tickets now.
There is an order form on page 17.

If you would like to be a Tar Wars presenter in your community next fall, contact Ginnie Flynn at gflynn@iafp. com or print out a presenter sign-up form on our web site at http://www.iafp.com/tarwars/corporate/presentersignup.htm.

Tar Wars Poster Contest Runners Up



Second place: Madalyn Dahl from Walnut.

Dawn Conerton from Bureau-Putnam Bi-County Health Department teaches Tar Wars throughout the county.



Third Place: Evelin Contreras from Cicero.

Sheila Black from Cook County Health Department taught to her class. This year Cook County Health Department piloted Tar Wars programs in four southwest suburban communities.

IAFP News

Shot Fairy to the rescue!

For those parents who dread every doctor's visit that requires yet another shot (or four of them!) one Evergreen Park family physician might have the solution. Scott Hanlon, D.O. has launched the "Shot Fairy" as an alternative to those traumatic exam table wrestling matches where nurses and parents hold a screaming child still for immunizations. Instead of calming screaming kids (and supporting some crying parents!) the Shot Fairy quietly gives sleeping children (ages 2-6) their shots while they are snug and sleeping in their beds. The child wakes up the next morning with a lollypop under the pillow and protected from preventable diseases!

Peggy McKeever, a nurse at Hanlon's Evergreen Medical, Ltd. practice came up with the concept several years ago as a way to keep her own children immunized without the trauma. Dr. Hanlon, 40 - who has three boys, ages 6, 4, and 3 - has also found success with the Shot Fairy approach. With many families and children in the practice, Hanlon wanted a way to keep kids up to date with their shots, while taking away the anxiety that kids and their parents face at each confrontation with the dreaded needle. So McKeever's personal experience as "Mom the Shot Fairy" grew into a business plan.

Hanlon and his wife, Colleen, along with McKeever and Jim Navarre founded Shot Fairy with a plan to offer vaccination services for the entire family. Children ages 2-6 would be vaccinated after they go to sleep and any older children or adults can also get their shots at the same time. Other planned



services include "flu shot parties" with wine and cheese and corporate flu shot clinics for employees. While initially the Shot Fairy will be serving Hanlon's South Loop area and the Evergreen Park community, Hanlon has big plans to expand the Shot Fairy throughout Chicagoland.

"It's a great option, especially for those who are uninsured, to be able to get a flu shot in a group setting, for a lower cost rather than going to a clinic or a grocery store and standing in line," says Hanlon. "Plus it's much more fun with friends and family."

The Shot Fairy earned some early publicity at the Chicago South Side Irish Parade on March 15th. Hanlon and his family built an 8-foot Shot Fairy in the family's living room and created a float for the parade. Along with his medical knowledge, Hanlon is a wizard with paper mache – spearheading the design and construction of the Shot Fairy, while his three children helped with the papering and painting.

"It was a great day," Hanlon describes the South Side parade experience. "The weather was perfect, which usually is not the case for this parade. A lot of my patients say they saw us." The float and the Shot Fairy concept also received coverage in the Daily Southtown and Beverly Review newspapers.

Unfortunately, the South Side parade has been cancelled for 2010 and the foreseeable future. Hopefully the Shot Fairy float will have other opportunities to bring smiles in the future. For now, she's in storage!

Find out more at www.shotfairy.com

Bucking the Trend

Loyola-Stritch School of Medicine posts a magnificent match in a down year for family medicine

Despite another year of declines in the numbers of U.S. and Illinois medical school students choosing family medicine in 2009, one Illinois school boasts a substantial increase. Loyola University-Stritch school of Medicine saw 19 of their 132 graduating students (14.4%) match into family medicine. Not only did they lead the state in the percentage of graduates entering family medicine, they also significantly bettered their 2008 total of 12 family medicine graduates.

"I can't say we did anything different this year in particular," says Loyola's family medicine department chair Eva Bading, M.D. "Our entire department is very involved throughout the process, in every aspect of the school, including the social events. Students know us; they're comfortable with us and know that we are always available to them."

Faculty physicians and FMIG leaders ensured that each FMIG meeting was well-attended and that students left with valuable perspective on the many opportunities available through family medicine.

Bading also praises Loyola's system of placing students into groups of 10 for their Introduction to Primary Care course. These groups meet three hours a week with one advisor, who stays with them throughout their four years of medical school. She also cites the highly-regarded third year family medicine clerkship and the outstanding clinical experiences that students get at their community sites, including the Loyola Family Medicine Clinic in Maywood.

IAFP student board member Anthony Mrgudich is now a Loyola graduate matched into family medicine. "My experiences during my third year family medicine rotation greatly influenced my decision to enter the field of family medicine," he says. "The faculty at Loyola's Maywood Family Medicine Clinic is made up of extremely intelligent, empathetic physicians who enjoy their work and care strongly about their patients. I have been lucky

(continued on next page)

to have a few of these physicians as my mentors throughout my medical school training."

Above all, Bading credits the example and enthusiasm set by faculty members. "Students see that we are excited and passionate about what we are doing, and they know we must be doing something right in family medicine." The school's Global Health medical mission immersion experience enables students to spend part of their summer between first and second year providing care in a third world country. Those trips are staffed by family physicians from the medical school as well as from Cook County/Loyola-Provident family medicine residency



IAFP student board member Anthony Mrgudich is one of 19 Loyola students who matched into family medicine this year.

program. Bading estimates about two-thirds of the physicians staffing those missions are family physicians, and another opportunity for family medicine to shine by example.

View the IAFP's full 2009 Match report at http://www.iafp.com/ students/match09.pdf

IAFP's Summer Externship Program plays a key role in bringing promising students to family medicine.

The following new family medicine residents participated in the Family Health Foundation of Illinois' Summer Externship Program after their first year of medical school in 2006. Thanks to the dedicated volunteer preceptors that helped lead these doctors to family medicine.

Student, Medical School

Christopher Bailey, Loyola Jerell Chua, CCOM Gina Ciacoia, CCOM Matt Frazier, CCOM Diana Climaco, Loyola Anthony Mrgudich, Loyola

Preceptor

David Hagan, MD – Gibson City Thomas Rohde, MD - Decatur Lisa Green, DO – Harvey William Hulesch, MD – Dowers Grove Corinne Kohler, MD - Champaign Matt Johnson, MD – Park Forest

FM Residency Program Match

Hinsdale
UIC/ Illinois-Masonic
UIC/ Illinois-Masonic
UIC/ Illinois-Masonic
MacNeal
UCSF

AAFP National Conference of Special Constituencies Update:

Congratulations to IAFP New Physician board member Ravi Shah, MD of Chicago. Dr. Shah was the Illinois GLBT representative to the AAFP National Conference of Special Constituencies April 23-24 in Kansas City, where he was elected as a Special Constituencies Alternate Delegate to the AAFP Congress of Delegates and also elected as the co-convener for the GLBT caucus at the 2010 National Conference of Special Constituencies.

The following Illinois members represented you at the conference:

Women physician-Glenda Rios, MD of Chicago



Dr. Ravi Shah

New physician -Renee Poole, MD of Chicago

Minority physician -Abbas Hyderi, MD of Chicago

GLBT physician – Ravi Shah, MD of Chicago

IMG physician -Asim Jaffer, MD of Peoria

IAFP member to receive 2009 AAFP Humanitarian Award

Congratulations to IAFP member Susan Nagele, MD who will be honored with the 2009 AAFP Humanitarian Award. The Illinois chapter nominated Dr. Nagele for her 24 years of service in Kenya. She received a 2008 IAFP President's award from then-president and SIU School of Medicine classmate Steven D. Knight, MD at the December 2008 IAFP annual meeting. Learn more about her at http://www.iafp.com/pdfs/presidentsAward.pdf

Last chance! Nominations are due to IAFP by May 31, 2009!

IAFP is looking for our next Family Physician of the Year and two Teachers of the Year. Award information and nomination forms are now available on the IAFP web site

- Family Physician of the Year http://www.iafp.com/pdfs/FPOY09.pdf
- Teachers of the Year http://www.iafp.com/pdfs/TOY09.pdf

The award recipients will be honored at the IAFP 2009 Annual Meeting December 5th in Oak Brook. Those physicians also are submitted as the Illinois AFP nominees for the AAFP Family Physician of the Year and Exemplary Teaching Awards. For more information, contact Ginnie Flynn at gflynn@iafp.com.

Update on 2008 Family Physician of the Year, William F. Hays, MD. Just days after receiving his award at the IAFP 2008 Annual Meeting in St. Louis, Dr. Hays underwent a successful double-lung transplant operation. He spent the next three months recovering from the surgery and undergoing therapy. In late March he and his wife, Pam, were able to return home to Herrin, where he continues to gain strength each day. He was also thrilled to be back in time for baseball's Opening Day, ready to root for his beloved St. Louis Cardinals. "I am feeling much better and beginning to get out and do things again which



Dr. William F. Hays

feels great," he says. Dr. Hays plans to resume working at Logan Primary Care in August.

2001 Illinois FP of the Year goes "speed dating" with medical students

Arvind K. Goyal, MD has enjoyed a tremendous 30 years at his Family Doctor, Ltd. solo practice in Rolling Meadows. He has cared for thousands of patients, generations of the same family, and made countless contributions to the health of his community. He has been honored with many awards, including the IAFP's 2001 Family Physician of the Year Award. He's been a leader in local, state and national organizations. And he's one proud family physician through and through, always advocating for his patients and his specialty to anyone and everyone.

So it's seems funny, but fitting, Dr. Goyal spent his last day of active practice at the American Medical Association's "Specialty Speed Dating" event for Chicago area second and third year medical students on March 31.

Students were paired with physicians on short "speed dating" rounds of 15 minute intervals. The event gave students the opportunity to interact with area physicians from various specialties and to get a sense of what it is like to work in each specialty. Goyal reports that he was able to talk with a total of 15 medical students in small groups of two to three throughout the evening. Some of them have even followed up with him since the event. "It was great to meet some fresh new faces," said Goyal, who also teaches a preventive medicine course to medical students at Chicago Medical School. "They were very focused. They want to make a difference and do the right thing, but are afraid of making some 'wrong choice'."

Next for Dr. Goyal: While continuing to teach at Chicago Medical School, Dr. Goyal has accepted a position with Alexian Brothers Health System as the chief medical officer for Linn Community Care, a federally qualified health center and residency program in Cedar Rapids, Iowa. He will continue to reside in Illinois and is assisting in the transition of Family Doctor, Ltd., which has been acquired by Alexian Brothers Health System.



Dr. Arvind K. Goyal

Calendar of Events

MAY

19 IAFP Board of Directors Meeting 28-29 Pri-Med Updates – St. Louis

JUNE

 9-10 Pri-Med Access – Downtown Chicago
 11 Illinois State Board of Health meeting – Chicago

JULY

Tar Wars Night at the White Sox game

SAVE THESE DATES NOW!

August 6-10 – National Procedures Institute, Chicago

September 22 – IAFP Risk Management Seminar, Oak Brook

October 10 – Fall Forum, Oak Brook

December 4-6 – IAFP Annual Meeting, Oak Brook





Five days of family physician advocacy can make a big difference! The IAFP's annual Spring into Action legislative effort benefitted from:

- Outstanding family medicine representation
- 2. Strong public healthy priority legislation
- 3. Great timing!

Everyone has a role!

Each lobby day brought together a motivated and energized contingent of IAFP members. The Academy was represented by board members and past presidents, residents and medical students, from Chicago to Harrisburg. With so much going on "under the dome" during those final weeks of the first half of session, members were able to make measureable impact on a variety of bills in both chambers.

All together we met with over 50 senators and representatives. IAFP also met with both leaders of the Senate: Senate President John Cullerton and Republican leader Sen Christine Radogno. During the March 31 Spring into Action, several IAFP leaders met with Carolyn Brown Hodge, the deputy chief of staff to Governor Pat Quinn in

the Governor's Statehouse office. Your leaders discussed the importance of the patient centered medical home model in improving health care outcomes and reducing catastrophic health care costs.

They also emphasized the need to train and retain more family physicians in our state.

Advocacy brings results!

Here's a look at the bills IAFP addressed during those five days – and the status of each one.

- SB 44 this bill would raise the state's excise tax on cigarettes by \$1.00 over two years to a total of \$1.98 per pack. Raising cigarette taxes is a proven method of reducing adult smoking rates and preventing youth from smoking. The bill passed the Senate on April 2.
- 2. SB 212 this bill would legalize expedited partner therapy in treating sexually transmitted diseases. While IAFP members were in the Capitol on April 2nd, they were able to watch the senate pass this bill by the vote of 48-6. See the sidebar story about Dr. Brenda Fann's success in securing her senator's vote on this bill.
- 3. HB 71 this bill would prohibit sending and receiving text messages

while driving. The IAFP All Member Assembly adopted a resolution at the annual meeting in December 2008 that the Academy would publicly support a state law to make it illegal to text while driving. The House passed the bill with a 89-27 vote on April 1, just hours after IAFP members lobbied their representatives to support the bill. As a result, April 2nd attendees were able to personally thank their representatives who voted for the bill.

4. HB 3923 - this bill provides common sense reforms for the health insurance companies that do business in our state. The bill passed out of the House on Friday, April 3.

All these bills now move to the other chamber where they will begin the process anew. IAFP members are asked to contact their senators and representatives to urge their support on all four of these important measures. So the Senate now considers HB 71 and HB 3923 and he House will take on SB 44 and SB 212. You can track their progress – cosponsors, committee votes, etc.) at www.ilga.gov – just input the bill number in the search engine on the left side of the web site.

Other important discussions

IAFP also supported sound fiscal policies for the state's Medicaid program. Our work included supporting senate bills on prompt payment for Medicaid providers and enabling the Comptroller to borrow in order to pay down the Medicaid debt that currently saddles providers with months-long payment delays. These bills remain alive in overall budget negotiations.

Members also talked with legislators about the importance of safeguarding new state revenue that will be coming to Illinois via the increased FMAP (Federal Medicaid Assistance Percentage), so that the additional estimated \$3 billion will stay in health care and not redirected into other spending purposes. IAFP also stressed that ensuring compliance with the Comptroller's payment initiatives would enable the state to capture its maximum allowable federal matching funds.

Finally, IAFP voiced our opposition to the Republican's proposal to institute managed care in the Medicaid program (link to the IAFP statement at http:// www.iafp.com/legislative/hb71.pdf).

IAFP's Year Round Team in Springfield

How do we track the legislation impacting health care? IAFP's contract lobbyists, Cook-Witter, Inc., have represented the Academy since 1991. Their services include tracking and monitoring legislation that impacts health care and providing consultation to our government relations staff on legislative strategy. Together, IAFP and Cook-Witter work with the legislative and executive branches of government in Springfield to ensure that family medicine's voice is heard. "Without their stellar record of integrity and careful guidance, IAFP's voice would be considerably diminished," attests Vince Keenan, executive vice president.

Cook-Witter's dedicated staff includes Beth Martin and Ann Bond, along with interns who help support IAFP's work in Springfield.

Meet your lobbyists from Cook-Witter, Inc.



Randall F. Witter President



Bruce Kinnett Vice President



Betsy D. Mitchell

Sidebar of Success Stories!

On March 18, IAFP resident member Rob Michael, MD (NorthShore family medicine residency program) met with Rep. Greg Harris outside the House chamber. During that discussion, Dr. Michael advocated for HB 71, to prohibit texting while driving. The next morning, Rep. Harris added his name to the bill as a cosponsor!

On March 31, Brenda Fann, MD, the assistant program director at Rush Copley Family Medicine Residency program in Aurora made her first trip to Spring into Action. Her senator, Chris



Rep. Greg Harris & Rob Michael, MD

Lauzen was unable to meet with her in person, but called her that morning. Dr. Fann spent several minutes on the phone with him going over the IAFP's priorities. He had questions about SB 212 (expedited partner therapy for STDs). Dr. Fann immediately faxed over the fact sheet on SB 212, along with a cover letter providing her own insights. Early the next morning, Sen. Lauzen's legislative assistant called Dr. Fann to tell her that she had convinced the Senator to change his vote and support SB 212, which he did with his April 2 "yes" vote.

Federal Government Relations Update

SIU Family Physician testifies before Congressional Committee

Family medicine education and Illinois were well-represented on March 18 when Jerry Kruse, MD, chair of the family and community medicine department at Southern Illinois University School of Medicine, testified before the U.S. House Appropriations Committee on Labor, Health and Human Services Subcommittee. Kruse was representing the Society of Teachers of Family Medicine, the Association of Departments of Family Medicine, the Association of Family Medicine Residency Program Directors, and the North American Primary Care Research Group.

Kruse testified in support of increased funding for primary care training and research, specifically Title VII Primary Care Medicine and Dentistry and Primary Care Research at the Agency for Healthcare Research and Quality (AHRQ) and at the NIH. He emphasized the role of primary care in delivering better health outcomes, lowering health care costs and eliminating health disparities across populations.

"Abundant evidence from the past

thirty years proves that primary care is the essential foundation of a well performing health system," Kruse told the subcommittee members. "We need to train more family physicians. We are very concerned about the production pipeline for family physicians. For the past three years, only 15 percent of U.S. medical school graduates chose careers in primary care, one-third the number we need for the best system."

The organizations Kruse represented that day asked Congress to rebuild its investment in primary care medicine training by providing an annual appropriation of \$215 million dollars for Primary Care Medicine and Dentistry health professions training grants, along with a \$415 million annual investment to AHRQ for primary care research.

Kruse summarizes his experience on Capitol Hill that day as a positive one. "The members of Congress were very attentive and interested in the testimony about the delivery of primary health services, in general, and about family medicine, in particular," he says. "I have no doubt that the House understands our message." Link to Dr. Kruse's testimony at http://www.iafp.com/legislative/kruse.pdf

Stay informed on federal family medicine issues at http://www.aafp.org/online/en/home/policy/federal.html

FDA-regulation bill passes the House

On April 2, the U.S. House of Representatives passed the Family Smoking Prevention and Tobacco Control Act (H.R. 1256) with a strong, bipartisan vote of 298-112. In fact, every Illinois representative voted "yes," except Rep. Luis Gutierrez was not there to vote that day.

The bill would give the FDA muchneeded authority to regulate cigarettes. The tobacco industry has managed to keep cigarettes exempted from FDA authority that applies to virtually any other product Americans can consume.

But this bill will enable the FDA to:

- Restrict tobacco advertising and promotions, especially to children.
- Require larger, more effective health warnings on tobacco packages and advertising.
- Ban misleading health terms such as "light" and "low-tar" and strictly regulate all health claims about tobacco products to ensure they are scientifically proven and do not discourage current tobacco users from quitting or encourage new users to start.
- Require tobacco companies to disclose the contents of tobacco products, as well as changes in products and research about their health effects.
- Empower the FDA to require changes in tobacco products, such as the removal or reduction of harmful ingredients or the reduction of nicotine levels.
- Fully fund the FDA's new tobaccorelated responsibilities with a user fee on tobacco companies so no resources are taken from the FDA's current work.

The bill moves to the Senate where it has always had strong support, including from President Barack Obama when he was a US Senator.



Photo by Jim Arvantes, AAFP News Now

Quigley elected to fill 5th District Congressional Seat

Cook County Commissioner Democrat Mike Quigley won the April 7th special election to fill the 5th District Congressional seat vacated by Rahm Emanuel. Emanuel left the House to accept the post as President Barack Obama's chief of staff. Quigley won easily with 70 percent of the vote in a heavily Democrat district and a low-turnout election. Quigley won the Democrat nomination after emerging from a very crowded primary contest back in March.



IAFP has worked with Quigley in his role on the Cook County board. In 2003, he sponsored the Cook County Clean Indoor Air Act that ensured the rest of Cook County would join Chicago with smoke-free workplaces. IAFP leaders in Cook County have also worked with him to preserve access to primary care services and reforming the faltering Cook County Board of Health.

Texas AFP creates video education about PCMH



The Texas Academy has launched an interactive website to educate members, other physician organizations, policy makers, business leaders and the public at large on the importance and value of the medical home. They have compiled a series of videos about the medical home that span the entire range of interested parties, from patients and physicians to business leaders and policy makers. Now you can see and share them all from one website for anyone interested in any aspect of the medical home. Go to http://www.MedicalHomeForAll.com and check it out. The four main videos address:

- 1. What is a Medical Home?
- 2. The Patient's View
- 3. Employers Support the Medical Home
- 4. Medical Home in Practice

You'll find all the videos, extended interviews and links to all kinds of medical home resources to share with colleagues, patients, community leaders - -anyone you want to educate about the patient-centered medical home.



CONCERNED ABOUT REIMBURSEMENT, COVERAGE ACCESS & LIABILITY LAWS?

Make sure they know it.



SUPPORT CANDIDATES WHO SUPPORT YOU.

Support FamMedPAC. FamMedPAC is the political action committee of the American Academy of Family Physicians. It is the financial vehicle through which you can support the election or reelection of candidates who share your commitment to family medicine. Now in its third year, FamMedPAC strengthens AAFP's advocacy efforts and our presence in Washington. And it needs your support.

Contribute now at www.FamMedPAC.org.







Continuing Medical Education

IAFP Online CME

CME by family physicians for family physicians!

With the Illinois Academy of Family Physicians CME website, www.IAFP. com/education (registration required), you will be able to track which CME courses you have completed and obtain your CME certificates - simply with the click of a button at the end of each completed online course!

IAFP is offering free online CME case studies at http://www.iafp.com/CME/

There are two to three case studies for each topic. Each study takes about 45-60 minutes to complete. Get high-quality, valuable CME your way, on your schedule!

2009 EDOPC Education Teleconference Schedule

Join colleagues and the Enhancing Developmentally Oriented Primary Care (EDOPC) staff for education teleconferences. You can earn CME credit and learn how to identify the purpose of early intervention, conduct various screenings using appropriate and effective tools, and develop strategies for making referrals for children and their families when you have concern, employ parent/caregiver education materials, and implement efficient office procedures for screening and referrals.

EDOPC Education Teleconference Schedule

- June 18, 2009 Perinatal Depression Screening and Referral
- September 15, 2009 Early Autism Screening and Referral
- November 17, 2009 Topic To Be Determined

All teleconferences are conducted from 8 a.m.-9 a.m. For answers to questions and additional information about these opportunities or to register for an education teleconference, please contact Paula Zajac, Project Coordinator at 312/733-1026 ext 212 or pzajac@illinoisaap.com.

NEW! AAFP LearningLink

Innovative Web-based Learning

Presenting the latest in online learning:

Access up-to-date, practical diagnostic and treatment information — in multiple formats including clinical exchanges and debates, topic-focused webcasts, and case-based learning.

Assessing and Managing Chronic Pain aafp.org/learninglink



This program is supported by an educational grant from PriCara, Division of Ortho-McNeil-Janssen Pharmaceuticals, Inc., administered by Ortho-McNeil Janssen Scientific Affairs, LLC.



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Pri-Med Midwest Conference & Exhibition

Save the date

Pre-Conference Symposia Day Wednesday, April 7, 2010*

April 8-10, 2010

Donald E. Stephens Convention Center Rosemont, IL

Annual conference and exhibition composed of Pre-Conference Symposia day, 3 core program days, and over 50 clinical lectures from Harvard Medical School and Northwestern University Feinberg School of Medicine. Plus, a dozen practice management sessions, industry-supported symposia, and a dynamic exhibit hall.

Sponsored by:

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Please note: Pre-Conference Symposia day and symposia sessions are ticketed events with limited availability that must be selected when registering.

Pri-Med Updates*

May 28-29, 2009 St Louis, MO

Complimentary CME program covering multiple clinical conditions important in primary care. Includes question-and-answer periods with expert faculty and opportunities to network with practicing clinicians from your area.

Pri-Med Access*

June 9-10, 2009 · November 6-7, 2009 Chicago, IL

A two-day CME program that will address the toughest challenges in primary care medicine today.

Pri-Med is proud to Partner with the Illinois Academy of Family Physicians to bring quality education to family physicians.



*These activities are sponsored by:



For more information, visit us at www.pri-med.com/iafp or call 866-263-2310 (Toll-free, Mon-Fri, 9 AM-8 PM EDT).

Get involved with seniors in your area Senior to Senior: Good Health, Understanding and Acceptance.

Senior to Senior: Good Health, Understanding and Acceptance is a new program being developed by the Family Health Foundation of Illinois (formerly the IAFP Foundation) to help with health literacy in the retiree to elderly population. The Foundation received a health literacy grant from the AAFP to pilot an activity Robert "Bob" Heerens, M.D., IAFP life member, past president and Foundation board member has been doing for years, into a formal program.

"I am excited about creating a program to get more Illinois physicians involved in sharing their knowledge with our senior population. For the past 20 years, I have been going out to where seniors gather in the Rockford area and talking to them about staying as healthy and active as possible in the senior years," says the 94-year-old Dr. Heerens. He also gives his audiences a booklet called "the Senior Health journal," which is full of useful information and space for listing their personal health information, prescriptions, important numbers, and other vital information.

He simply contacted a few groups such as Lion's Club, Rotary groups and seniors' communities to see if they would be interested in a physician talking to the group about their health. He tells each group a little about himself and the importance of staying as healthy and active as possible. He uses a few statistics to break the ice such as "At age 70, a person's heart has beaten 2 billion, 885 million times. It also has pumped 56 million, 362 thousand gallons of blood." He also finds the Senior Health journal a great handout to get conversations going.



"Once you've broken the ice, then questions start coming. It's a pleasant way to spend an hour or so and it is so appreciated by the people you talk with," explains Dr. Heerens. "I greatly enjoy staying active and keeping my hand in medicine, even in retirement. I feel working with the senior population is sharing the best of family medicine—helping older citizens understand their health."

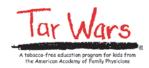
And now it's time to take Dr. Heerens' great work statewide. Don't let your

great knowledge go unused in retirement. You are needed as a great asset in your community. The AAFP grant will cover the cost of the journals for physicians to hand out. All members have to do is request the journals from the Foundation and start making presentations to their local seniors' groups. The Foundation will track who is making presentations, how many and where. Staff can also provide pre- and post-tests if desired.

GET STARTED NOW! Contact Christi Emerson at cemerson@iafp.com or call her directly at 630-427-8005. You can call the Family Health Foundation of Illinois toll-free at 800-826-7944 and ask for extension 210.









WHITE SOX VS. INDIANS

Wednesday, July 8, 2009 - 7:11 p.m. U.S. Cellular Field

SPECIALLY PRICED WHITE SOX TICKETS!

Home Runs for Healthy Kids: Proceeds benefit the IAFP Foundation's Tar Wars tobacco prevention community service programs.

EVERY TICKET YOU PURCHASE FROM THE IAFP FOUNDATION FOR THAT GAME WILL MEAN A TAX-DEDUCTIBLE DONATION TO THE FAMILY HEALTH FOUNDATION OF ILLINOIS' TAR WARS PROGRAM. TICKETS ARE ONLY \$33 EACH (\$2 LESS THAN LAST YEAR!) FOR OUR LOWER BOX SEATS!

Orders will NOT be redeemed at the U.S. Cellular Field ticket windows or the White Sox administrative offices.





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ALL ORDERS MUST BE RECEIVED BY JUNE 5TH!

MAIL OR FAX THIS FORM WITH PAYMENT TO:	TAR WARS Wednesday, July 8, 2009 - Cleveland Indians		
	# OF TICKETS	TICKET PRICE	TOTAL
ILLINOIS ACADEMY OF FAMILY PHYSICIANS ATTN: TAR WARS 4756 MAIN STREET LISLE, IL 60532 OR FAX: 630-435-0433		Lower Box @ \$33	
		Hot Dog Value Meal (hot dog, chips, soda – \$5.75)	
		Parking @ \$23	
		Total Enclosed	

All orders must be received by FRIDAY, JUNE 5TH! Tickets will be mailed to the address listed below. All game times and promotions are subject to change.

Questions? Contact: Ginnie Flynn - Fax: 630-435-0433 or e-mail: gflynn@iafp.com Phone 630-427-8004 (We accept Visa, MasterCard, and American Express)

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Ellen S. Brull, MD

- Family Medicine Associates of Lutheran General, Niles
- IAFP Past President
- IAFP Delegate to the AAFP Congress of Delegates
- AAFP Commission on Governmental Advocacy
- IAFP Government Relations Committee
- Summer Externship Preceptor

Why did you choose family medicine?

I chose family medicine because I wanted a specialty that looked at the patient as a whole person. To me that is the true practice of medicine.

What is the IAFP's best resource?

Our best resource is our physicians. We really serve as representatives for our patients. We go to the legislature and talk about what our patients need. Lawmakers respect us because they know we're here for our patients and not just our bottom line.

What has the AAFP Commission of Government Affairs accomplished at the national level?

We have more money coming down for training programs. They're [Congress] talking about the patient centered medical home, which is our concept to try to create better care for the patient and at the same time, better reimbursement for primary care.



How do you balance the demands of the career with your personal health and well-being?

I've always been a believer that I have to practice what I preach. I feel you have to schedule that time for exercise, so I have a schedule where I work out between three and six days a week. I try to make healthy choices for myself to the point that if we accept any food from an outside company at my practice, I insist that it be healthy.

What's your guilty pleasure food?

Chocolate! But that has some anti-oxidants and can be good for you, in moderation, of course!

Talk about your work with the Illinois Electronic Health Record Task Force

The goal of the task force is to create a health information exchange for our state. So if my patient goes to the hospital and then comes back to see me, I could retrieve the data of what happened. It would save money and



be better for the patient. The task force takes all the players, from providers and insurance companies and others together to create a bank, if you will, of this data.

What do you see as the priority for family medicine practices like yours?

I think that one of the major pushes for small private practices is for us to become true medical homes. In order to do that, we need electronic medical records, which are extremely costly and difficult to obtain and most small private practices don't have them. I think we need to make that a priority so that we can all become the medical home that we already provide, but can do better.

Something unusual about you...

When I moved back to Glenview, where I grew up, I found that the phone number I had as a child was available. So I now have the same phone number that I grew up with!



Dr. Brull with Illinois Representatives Julie Hamos and Elizabeth Coulson

Members in the News

E-mail Ginnie Flynn at gflynn@iafp.com to share your media clips or to request a copy of any items listed below.

IAFP president **Javette C. Orgain**, MD was one of six Chicago area health and insurance executives whose input *Crain's Chicago Business* sought for their April 6 feature on Obama's plans for health care reform. Dr. Orgain was only physician included in the article.

Family Physicians **Jim Hong**, MD and **Haresh Motwani**, MD of Edwardsville saw their practices destroyed by a fire on March 17, which may have been caused by a cigarette tossed outside their building. The doctors have temporarily relocated to the Anderson Hospital Physician Office Building, as reported in the March 23 *Alton Telegraph*. An April 1 *Edwardsville Intelligencer* article reported on Dr. Hong's first day back in practice at his new location.

Champaign area physicians are seeing a rise in stress-related illnesses tied to job loss and other economic issues in their community. Family physicians **Lenley Jackson**, MD and **Ingrid Antonsen**, MD are quoted in the March 23 *Champaign News-Gazette* that they are seeing a marked increase in anxiety and depression among patients, along with stomach problems, insomnia, panic attacks, uncontrolled diabetes and blood pressure and more. Antonsen called the stories she hears from patients "heartbreaking."

John Sage, MD of Mt. Prospect was featured in a March 23 *Daily Herald* article about the toll our economic crisis is taking on patients. Some are putting off their health care needs because

they've lost their job or fear they could lose it for taking time off work. Sage related that he is contacted once or twice a day by patients who have lost their job or think they might soon be unemployed.

Dr. Sage and fellow IAFP Public Relations Task Force member **Kristin Drynan**, MD of Elgin both landed letters to the editor in support of HB 71, which would ban texting while driving. Sage's letter appeared in the March 21 *Daily Herald*, while Drynan's letter appeared in the March 23 issue of the *Kane County Chronicle*.

Arvind Goyal, MD of Rolling Meadows was honored at a city council meeting on Monday, March 23 for his 30 years of family medicine practice in the city of Rolling Meadows.

Goyal was also featured in a March 16th American Medical News story about physicians helping their patients maintain their health in difficult economic times. If an established patient in Goyal's practice loses his or her job, Goyal will continue to care for that patient without charge until the patient is employed once again.

Jill Carnahan, MD is one of the physicians at the new Methodist Center for Integrated Medicine that opened March 9th in Peoria. The clinic is featured in the March 24 *Peoria Journal Star* and in 18 other GateHouse newspapers throughout the state. Learn more http://www.drcarnahan.com/.

Robert Bales, MD of Rockford was featured in an April 30th *Rockford Register Star* story about the impact the federal cigarette tax hike has had on patients interest to quit smoking. He stresses the importance of talking to every patient, every time about tobacco use.

Susan Albovias, MD and **Araceli Feria**, MD were honored by Advocate
Christ hospital for their 30 years of
service at the hospital's annual "All That
Glitters" black-tie celebration on April
4th at Navy Pier. Congratulations to
both!

Tom Cornwell, MD was a featured story on KLOVE Radio – a gospel radio network with six stations in Illinois Chicago 94.3, De Kalb 105.3, Joliet 94.3, Minooka 101.5, Park Ridge 96.7, Quad Cities 98.9. Cornwell was interviewed about the genesis and development of his HomeCare Physicians practice. The station created an eight-minute Podcast on his practice and excerpts played throughout the day on March 19. Link to the podcast at http://www.klove.com/News/ and click on "Making the House Call" podcast.

Samuel Grief, MD of the University of Illinois at Chicago department of family medicine was quoted in the March 30 *Chicago Tribune* story about a study that looked at high weight babies as an indicator of childhood obesity. The same story also ran in the *Bloomington Pantagraph* the next day.

CLASSIFIED ADS

PRACTICE FOR SALE: Profitable established independent primary care medical practice located on Southside of Chicago (near Midway Airport) serves 6,000+ patients and growing, occupies 4,000 square feet, with seven fully-equipped exam rooms, state-of-the-art integrated electronic medical record and practice management system. Contact Izielinski@visioneermd.com.

IAFP members may post a classified ad in Illinois Family Physician free of charge. Classified ad rates for non-IAFP members are \$100 per issue. Contact Ginnie Flynn at gflynn@iafp.com to place your ad or you can download and print a form at http://www.iafp.com/pdfs/ADFORM.pdf.

News Briefs

Meridian Health Plan is Now Enrolling Providers in Cook County

(Submitted by Meridian Health Plan)

Providers have a new managed care partner in Illinois! Meridian Health Plan is a licensed health maintenance organization contracted with the Illinois Department of Healthcare and Family Services (HFS) to serve the Medicaid population, including All Kids, Family Care and Moms and Babies participants. Meridian is locally operated, with an office in Chicago, Illinois.

Although we are new to the Illinois market, Meridian has significant experience serving the Medicaid population in the State of Michigan through our sister corporation, Health Plan of Michigan (HPM). Health Plan of Michigan is the third largest Medicaid health plan in the State of Michigan, serving over 178,000 members in 42 counties. HPM was ranked among the Top 15 Medicaid health plans in the country, according to U.S. News & World Report/NCQA's America's Best Health Plans 2008. We intend to deliver this high level of quality and customer service to the Illinois Medicaid program.

In December 2008, Meridian Health Plan began enrolling members in seven counties, including Adams, Brown, Henry, Mercer, Pike, Rock Island and Scott. We are growing rapidly in these areas and are expanding into new service areas, including Cook County.

Meridian is actively recruiting primary care physicians and specialists to join our network in Cook County. We offer a hassle-free authorization process, a generous provider incentive bonus program and a web portal for

eligibility verification and claims status. Most importantly, we focus on timely and accurate claims payment within 10 days or less.

If you are interested in contracting with Meridian Health Plan, please contact Benjamin Schoen, Director of Network Development at (312) 533-8765. For more information about Meridian Health Plan, visit us on the web at www.mhplan.com.

News You Can Use: Tech Bit Clean Up Your Hard Drive for More Speed

Submitted by Gregg Marshall

Is your computer getting slower? I've often thought that Microsoft and Intel have conspired to slow computers down over time so you'll buy a new one every year. Actually as you use your computer, install new programs and get updates, your computer develops what I call plaque, just like your teeth. So it's time to "brush" your computer.

Start by getting rid of all the "bloatware" that came with your computer. The easiest solution to that is PC Decrapifier (yes that's its name, it's at http://www.pcdecrapifier.com/).

Then uninstall all those neat programs you might have decided to try and never use. Go to your control panel and choose Add/Remove Programs (XP) or Programs And Features (Vista). If you don't know what's on your PC, try WinAudit (http://www.pxserver.com/winaudit.htm), a great utility for generating a comprehensive report of everything about your computer.

After cleaning off all the extraneous programs, do a disk defragmentation. You can use Windows defragmenter by going to Start then My Computer and right clicking on the C drive. From the context menu that pops up, select properties, then tools. Do a disk clean up first, then do a defragment.

Another option is to use Diskkeeper (http://www.diskeeper.com/defrag.asp)

that automatically defragments your disk in the background. My favorite is Disktrix' Ultimate Defrag (http://www.disktrix.com), which not only defragments your hard drive, it moves frequently used files to the same area to keep the seek time to a minimum. That will clean up your hard drive, next time we clean the Windows.

Gregg Marshall, CPMR, CSP, is a speaker, author and consultant. He can be reached by e-mail at gmarshall@repconnection.com, or visit his website at http://www.repconnection.com.

AAFP seeks practices for vaccine cost study

The Verden Group, a practice management consulting firm focused on primary care, is in the process of recruiting practices to participate in a landmark vaccine cost study. Practices of all shapes and sizes from across the country are needed to participate in the study.

A representative from the Verden Group will spend a day onsite with you to observe the many aspects involved in the vaccine delivery process and to understand costs incurred through the entire revenue cycle. In return, the Verden Group will provide free consulting in the form of a customized report detailing any opportunities you may have for vaccine cost improvement based on their visit to your practice.

If your members are interested in signing up or learning more about the study, please visit http://www.verden-vaccinestudy.com for more details.

If you have questions, contact Trevor Stone with AAFP at tstone@aafp.org or 800-274-2237, ext. 4178.

Risk Management & Medical Practice Web Sites

Medical Practice web sites have become increasingly popular among physicians in recent years. A practice web site is available 24 hours a day, seven days a week and can offer patients basic instructions, patient-focused medical information, education, and answers to general health care questions when and where they need them. Most practice web sites are now being integrated with practice management systems to offer appointment scheduling capabilities; administrative, insurance and billing functions; and secure communications with doctors, nurses, and staff. In addition, a well-designed and contentrich web site can attract and engage both new, and current patients. Thus, most physicians use their web sites as dedicated marketing and advertising tools, as well.

From a risk management standpoint, the majority of content on practice web sites is relatively benign. Essential information on location(s), office hours, contact information, new patient information, routine forms, scheduling appointments, insurance and billing, hospital affiliations, along with basic information about the doctors, nurses, assistants and staff, is derigueur. Likewise, general information on your type of practice (e.g., cardiology, plastic surgery, radiology, etc.) and the range of patients you see (e.g., male/female, children/adults/ elderly, etc.); the health conditions and diseases you treat; the services you provide and/or procedures you perform; additional information about your specialty and practice area; and links to related web sites like the American Cancer Society or the American Heart Association, are pretty standard—and rather innocuous from a medical malpractice risk management point-of-view.

Unfortunately, certain content typical of many practice web sites is ripe for malpractice pitfalls. Risk management issues with practice web site content usually arise in one of two areas: medical advice and marketing/advertising.

Medical Advice

A physician's greatest risk in having a web site is being perceived as dispensing

medical advice to a patient she or he has never seen or examined. Physicians walk a fine line when providing general medical information, patient education, and answers to basic health care questions on a web site. Recognize that many patients use the Internet to self-diagnose or self-treat actual or perceived medical conditions. Informational and educational content is intended to be just that—informational and educational only. Ensure this is stated on your web site in a conspicuous place and in no uncertain terms.

Consult an attorney for advice on how to craft an appropriately worded legal disclaimer that disclaims responsibility or liability for any harm resulting from the use or misuse of any information on your web site. At minimum, the disclaimer should explain that information posted on the web site: 1) is not medical advice, and should not be taken as medical advice; 2) should not be used to diagnose or treat a health problem or disease; and 3) is in no way meant to be a substitute for professional medical care. Advise patients and prospective patients to schedule an appointment or consult their own physician if they suspect they have a health condition or serious medical problem.

Marketing & Advertising

In today's ultra-competitive business world, a great deal of marketing and advertising is done via the Internet; physicians are following this trend. Advertising is intended to spark the interest of consumers, which often means raising consumers' expectations about products and services. In health care, however, raising patients' expectations to unrealistic levels can lead to malpractice liability for physicians who do not deliver on those promises. Consider the following risk management guidelines when developing marketing and advertising content for a medical practice web site:

- Do not guarantee outcomes, the success of treatment, or "complete patient satisfaction." Do not promise to deliver anything on your web site that you know, in reality, you cannot deliver every single time in practice.
- Do not use language that might inflate patient expectations to unreasonable levels. Do not put anything in writing on your web site about a condition, disease, medication, course of treatment, service, or procedure that you would not be comfortable saying in a face-to-face

conversation with a patient.

- Be wary of unequivocal statements about care and treatment that are coupled with terms like "safe," "safe and easy," "permanent," "effective," "cure," or "pain-free."
- Generally speaking, subjective advertising statements like "The doctors, nurses, and staff at XYZ Clinic strive to deliver the very best quality of patient care," or "The surgeons at ABC Surgery are among the most educated, trained, skilled, experienced, and respected in the area," are appropriate. However, avoid making any claims regarding a physician's experience, competency and quality of care implying an exclusive and unique skill or remedy. Do not use language which could be interpreted as elevating your standard of care above that required by law.
- Avoid objective advertising statements, especially those that cannot be readily verified by objective standards or data. For example, do not list your personal success rates with a particular course of treatment or procedure, especially if those results are above national averages. If you do, make sure they are accurate and that you have documentation to back them up.
- Patient testimonials can be powerful advertising tools; however, some states' laws regulate or completely prohibit their use. Also, the Federal Trade Commission states that patient testimonials must reflect the "typical and ordinary" experiences of the physician's patients. Consult a lawyer for advice on state and federal laws before posting patient testimonials on a web site. A carefully worded legal disclaimer—posted in a conspicuous place—should accompany all testimonials on your web site.
- Before-and-after photographs are commonly used by plastic surgeons and cosmetic dermatologists on web sites. Again, a properly phrased legal disclaimer explaining that all patients are different, that results depicted in the photographs are not necessarily representative of all results, and that individual results may vary, is advisable. The American Society of Plastic Surgeons' ethical rules prohibit the use of before-and-after photographs or images of persons which use different light, poses, or photographic techniques to misrepresent the results achieved.
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