Westchester Physician

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PRESIDENT'S MESSAGE GOOD NIGHT IRENE PETER ACKER, MD PRESIDENT

[My office has been inundated with RSV, Flu, Covid, etc so no time to write a fresh column! Below is one of my favorites from years ago]

In the days leading up to Hurricane Irene, I felt an anticipatory excitement as I followed its course and viewed its gargantuan size on the satellite images. Of course, I was mindful of the potential destruction and suffering that such a behemoth was likely to inflict, but still I could not suppress a boyish enthusiasm at this break from the mere quotidian and dull weather patterns. Part of it was that I wasn't scheduled to be on call and thus would not have to worry about wending my way through thickets of downed trees and loose electrical wires in order to see a patient in the emergency room. I made the usual preparations around the house – gathering loose objects outside and making sure that we had plenty of batteries and candles. On Saturday evening my wife and I settled in to await the storm.

My mind harkened back to the last major hurricane to directly strike New York: Hurricane Gloria in 1985. I remembered it well because that was the year that our first child was born, Karen, who is now a fourth year medical student. She was just 2 months old and as every new parent will attest, once you have a child you learn to worry in a whole new way. I was much less casual about that storm. We taped all our windows of our Queens apartment and placed our infant daughter in the hall way to avoid any possible broken glass.

I wanted to stay up and watch the storm, but alas I fell asleep and missed the brunt of the high winds that my neighbors later told me were quite fierce at about 3 – 4 in the morning. I woke to find that we had lost power, but the winds had already abated somewhat, though the rain was coming down in buckets. We ventured out around midday, and walked up our small street, encountering fallen trees and neighbors who similarly were out assessing the effect of this rare event. There is nothing like a storm to bring out neighborly bonhomie and we chatted amiably, comparing notes and generator capacities.

Memories from even further back were stirred. Hurricane Donna struck Miami in 1960 where I spent most of my boyhood (and interestingly, barreled up the East coast to hit New York dead on). The atmosphere of my street today was redolent of that in Miami with

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PETER ACKER, MD President, WCMS

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FROM THE GUEST EDITOR...

THE SUN IS SHINING

BRUCE MOLINELLI, MD, IMMEDIATE PAST PRESIDENT



Editors note: Dr Molinelli will be taking this month off from writing his column for the newsletter. (Thank our lucky stars! Any more doom and gloom from a senior surgeon looking towards the past history of medicine and injecting his adumbrations would just be intolerable.) This month we have invited the generic senior medical student to contribute to the newsletter, one who teeters at the start of a career filled with idealism and opportunity.

I cannot imagine doing anything else. Medicine is incredible. Ever since I saw my — (fill in the blank: brother, father, uncle, friend, friend's mother, etc) suffer from "X" disease, I was enamored by the care of their physician. The doctor would hold their hand, speak calmly with knowledge and authority and make them feel safe and cared for. I saw how this interaction meant the world to my ____ and eased the suffering.

The physician's knowledge with compassion struck me with such impact, that I decided I wanted to go into medicine.

I was able to understand this further when I volunteered at the "<u>Pick Your Clinic</u>" (low income underserved regional medical facility) and saw a young homeless woman with a psychological disorder. Her request was simple, a glass of water while she waited to be seen. Despite the well intentioned and hustling nurses and doctors at this hectic facility, there was not a moment when they had time to respond to such a basic request. As a volunteer, I was able to bring a cup of water to this patient who then opened up and told me her story and how she is simply feeling scared and alone and forgotten. This reached me deeply to remind me to bring compassion to what I do, no matter how basic.

Another career affirming experience was in college when I worked in the lab of Dr "<u>Pickaname</u>"(famed or not so famed scientist/doctor in the industry) who is studying "Transcription Translocation of etc. etc. etc." Understanding the molecular biological sciences was not only interesting but will help further my career in medicine. I couldn't wait to learn more and apply it to my future.

When I started my own research project prior to medical school, in the
field of (choose from an assortment of specialties like immu-
nology, psychology or cancer research) I was able to prove the relation-
ship of with and how exercise and sleep This has developed my
interest in the subspecialty of

During my time at "<u>Anyplace Medical School</u>", I have reaffirmed my commitment to this noble profession. Learning the intricacies of how the human body normally functions I was enlightening to say the least.

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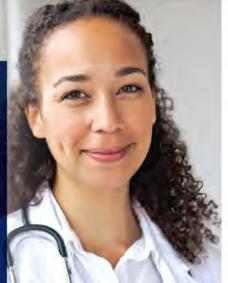
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PRESIDENT'S MESSAGE GOOD NIGHT IRENE PETER ACKER, MD PRESIDENT

(Continued from page 1)

branches and debris strewn everywhere. A large tree fell into our swimming pool and I remember vividly the boyish pleasure of swimming under the water weaving my way through the branches until my father spotted me.

As the winds receded, so did the excitement and it was replaced with the more sobering practicality of living without power. Many, I'm sure, had an initial feeling of "that wasn't so bad" until over the next days news trickled in of the awful destruction in the Catskills, Vermont and Northern New Jersey. And then, worse, the loss of life. In particular I was moved by the death of a local psychiatrist, Dr. Peter Engel who drowned while rafting on the Croton River. He was by all accounts a beloved and admired physician and a highly skilled whitewater rafter. It stirred yet another memory – of me body surfing in the Pacific coast of El Salvador last January (at the end of a medical mission there). Similarly, I am an experienced body surfer (in my early 20's, I spent 4 weeks camping out on Pie de La Cuesta, a small Mexican village north of Acapulco and riding monster waves day after day). Also, I was a champion competitive swimmer. Yet one wave caught me and I was powerless to change my tumbling trajectory which ended with me being slammed head first into the sand. My shoulder took the brunt of the impact and left me with an AC separation which took 2 months to heal. As I thought back on the experience, I felt a chill as I thought about how the slightest shift could have resulted in a fatal cervical fracture. I felt a sense of chagrin about my casual attitude toward the coming of the storm. In the words of Dante, "And as he, who with laboring breath has escaped from the deep to the shore, turns to the perilous waters and gazes."

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STOP THE TRAIN Elliot Barsh, MD

"Somewhere along the way, we must learn that there is nothing greater than to do something for others."

Hi everyone.

I hope our column finds you well.

We are all so alike, with **desires**, **fears**, and **ambitions**.

We are born **vulnerable** and **dependent**, and become ourselves with these basic traits as our foundation.

Dr. Martin Luther King called this "dependent origination."

He believed that more than anything else, we need each other.

We need to

be **seen**, **heard**, **lifted up** and **brought into existence** by others.

The Zulu greeting **Sawubona** means "**I see** you."

More than ordinary seeing, it is saying that, "I see myself in your eyes", or "the God in me sees the God in you."

The Zulu response to this greeting is **Ngikhona**, which means "**I am here**".

Inherent in this greeting and grateful response is the sense that until you saw me I did not exist.

In essence, a person is a person because of other people.

We can greet people **wholeheartedly**, and actually see the person.

We can see more than what they look like, sound like, or believe in.

The Zulu belief is that we can see the **magnificence** within them when we greet them.

In the words of Dr. MartinLuther King,...

"I can never be what I ought to be util you are what you ought to be.

You can never be what you ought to be until I am what I ought to be."

STOP THE TRAIN Elliot Barsh, MD

(Continued from page 5)

Thanks for reading.

Be safe.

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"What keeps us from opening our arms to embrace another person and their story? Their story is our story too."

Broken Both Ways

"I can't take your pain away, but I can promise you won' have to hold it alone."

Train Yourself to Always Show UpEvery gesture of recognition marries love and humility, vulnerability and sacred responsibility.

"The base level is vulnerability and intimacy."

My Relationships Have No Clothes

I have no moral objection to infidelity. For me, sex is just sex.

"The question is not whether we will be extremists, but what kind of extremists we will be. Will we be extremists for hate or for love?"

Martin Luther King Jr.'s 'Letter From Birmingham Jail'

'The Atlantic' published this landmark document of the civil-rights movement in the August 1963 issue

"Making time for a buddy is the best way to make time for ourselves!"

Buddy System

In the spring of 2012, the Spanish city of Sabadell set out to celebrate the 130th anniversary of its founding with a most unusual, electrifying, and touchingly human rendition of Beethoven's masterpiece, performed by a flashmob of 100 musicians from the Vallès Symphony Orchestra, the Lieder, Amics de l'Òpera and Coral Belles Arts choirs.

Ode To Joy

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MSSNY NEWS

CMS Interoperability and Prior Authorization Final Rule CMS-0057-F

The Centers for Medicare & Medicaid Services (CMS) affirms its commitment to advancing interoperability and improving prior authorization processes by publishing the CMS Interoperability and Prior Authorization final rule (CMS-0057-F). Through the provisions in this final rule, Medicare Advantage (MA) organizations, state Medicaid and Children's Health Insurance Program (CHIP) Fee-for-Service (FFS) programs, Medicaid managed care plans, and CHIP managed care entities.

Qualified Health Plan (QHP) issuers on the Federally Facilitated Exchanges (FFEs) (collectively "impacted payers") are required to implement and maintain certain Health Level 7® (HL7®) Fast Healthcare Interoperability Resources® (FHIR®) application programming interfaces (APIs) to improve the electronic exchange of health care data, as well as to streamline prior authorization processes.

This final rule aims to motivate healthcare providers to utilize electronic prior authorization processes. As per the rule, a new measure has been added for MIPS eligible clinicians in the Promoting Interoperability performance category of MIPS, and also for eligible hospitals and critical access hospitals (CAHs) under the Medicare Promoting Interoperability Program. <u>Learn More</u>

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Karen Parker, PhD (Keynote) — Professor, Department of Psychiatry & Behavioral Sciences, Stanford University School of Medicine; Principal Investigator, Social Neurosciences Research Program

Harland Winter, MD — Director, Center for Pediatric Inflammatory Bowel Disease, Massachusetts General Hospital for Children; Associate Professor, Harvard Medical School

Douglas Wallace, MD, PhD — Endowed Chair in Pediatric Mitochondrial Medicine and Metabolic Disease; Director, Center for Mitochondrial and Epigenomic Medicine, CHOP; Prof., Dept. of Pediatrics, Univ. of Pennsylvania

Terry Harville, MD, PhD — Professor of Pathology and Laboratory Services, and Internal Medicine, Medical Director, HLA and Histocompatibility Laboratory, The University of Arkansas for Medical Sciences

Ming Lim, MD, PhD — Professor, Paediatric Neurology, King's College London; HOS Children's Neuroscience, Consultant Paediatric Neurologist, Children's Neuroscience Centre, Evelina London Children's Hospital

John Gaitanis, MD — Associate Professor of Pediatrics, Clinician Educator, Brown University; Pediatric Neurologist, Hasbro Children's Hospital; Director of Child Neurology, Brown Medical School

Jennifer Frankovich, MD, MS — Clinical Professor of Pediatrics, Director, Stanford Children's Immune Behavioral Health Clinic and Research Program, Stanford University School of Medicine

Richard Frye, MD, PhD — President, CSO, Autism Discovery and Treatment Foundation; Director of Research, Rossignol Medical Center; Sponsor and Principal Investigator, Southwest Autism Research and Resource Center

Ritika Kapoor, MBBS, PhD, FRCPCH — Consultant Paediatric Endocrinologist and Adjunct Senior Lecturer, King's College Hospital, NHS Foundation Trust & King's College, London

Ben Marlow, MBBS, MRCPCH, PGCME — Clinical Director - The Synapse Centre for Neurodevelopment; Clinical Lead for Paediatrics SNEE ICB; Visiting Senior Lecturer Anglia Ruskin School of Medicine



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MSSNY Announces two NEW Podcasts on COVID-19

★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

★★The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast website I★★

FROM THE GUEST EDITOR...

THE SUN IS SHINING BRUCE MOLINELLI, MD, IMMEDIATE PAST PRESIDENT

(Continued from page 2)

While on my clinical rotations at "Anywhere Hospital", I was exposed to patient care on the different services gaining understanding of the ramifications of disease processes.

I developed an appreciation for the role of the attending physician in both medical knowledge in diagnosis and compassion in treatment. Their dedication and stamina were incredible, despite being restricted to follow prescribed governmental, insurance and hospital based protocols and algorithms.

I now embark on residency when I can finally work in my chosen field, developing and learning the skillset necessary to be a practicing physician. I look forward to treating people with my knowledge, respect and compassion and with my own individual approach. I hope to pay attention to the details that matter to each and every patient and focus on their needs.

Although the road has been challenging, I hope to make a difference to my patients with the grasp of the material and experience I have gained, and to further learn as I advance through my career. Wanting to be like my mentor is the goal, practicing on my own is the dream, dedicating my life to an honorable purpose is rewarding, treating others is noble.

Yes, I have loans. Yes, it seems some specialties are not paying as well as others and certain locations are better than others. Yes, I strongly am considering pediatrics, but cosmetic plastic surgery will more likely pay my loans back sooner. Yes, there are underserved locations that cannot be considered if I plan to become financially sound, but I still want to be a doctor, no matter what the setbacks, even if I have to develop a side hustle, since this is my dream.

When speaking to established physicians, I hear their complaints about how the profession has changed, but this does not deter me since these are not changes I have gone through. I just got here. I am not in a position to compare to the past. And this still is the only profession I have imagined for myself.

I acknowledge that I am at the beginning of my career, and as I gain experiences, I will then be ready to use my problem solving skills to contribute to the "fix" of the delivery of medicine in our country to further enhance the care of our patients. I am so excited to begin!

(Ed. Note: We tried to keep Dr Molinelli away this week, but he insisted on adding his two cents to this journal submission. Doesn't he get the "life" portion of work-life balance? Couldn't he stay away for just one week? These damn opinionated and anachronistic old-timers! Here are his comments below.)

We must utilize this infusion of ideal energy and harness it to direct control of care of our country. Let us, the established physician community, not leave a completely broken system for these newcomers with a bright future who currently have the energy and are developing the skillset to improve delivery of care.

These are gifted individuals who will take our profession to the next level. We are lucky our profession still attracts such talent. They are smart, resilient, have grit. Support them and let them grow. I am sensing an old feeling that I had to dust off and reexamine, albeit requiring some hard polishing to bring out the original sheen.

— optimism—

Yes, I am optimistic, despite my disgruntled moniker as a senior surgeon, about the future of medicine in the hands of the next generation of physicians.

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