# TAKE CARE OF YOURSELF

As physicians, you take care of your patients, but do you ever take the time to take care of yourself?

Eat right, exercise, get enough sleep, relax! Good advice for your patients - and for you! The first step to taking better care of yourself is to recognize that this is something you need to do. Beyond the obvious - don't smoke, drink only in moderation, watch your weight - there are steps you can take to eliminate some of the stress in your life. Here are a few:

Get Active - Take a 30 minute walk, play basketball with your kids, take up a sport

Laugh More - Don't take everything so seriously! Learn to have fun and laugh more.

Connect with Others - You may not feel like socializing after seeing patients all day, but connecting with friends and family provides you an opportunity to focus on something - and someone - other than yourself.

Assert Yourself - particularly if you are in a situation where you feel you are constantly bowing to pressure from others whether at work or at home, stand up for what you want once in a while, even if it's only what movie you prefer to see.

Try Yoga - Not for everyone, but a good stress-reliever for those who enjoy it.

Get Enough Sleep - with all the pressures you face, this may seem like an impossible task. Go to bed and get up at the same time every day to establish a healthy sleep routine. Turn off the TV and the computer. Make sure your bedroom is cool enough for sleep (65 degrees is optimal).

Keep a Journal - Again, not for everyone, but some find it helpful to get thoughts down on paper.

Get Musical and Be Creative - Were you in a rock band in high school? Still love to play the piano to relax? Or maybe you just love listening to oldies on the radio. Are you a frustrated artist? Pick up a paintbrush or take an art lesson!

Seek Counseling - When your problems overwhelm you, or your life seems out of control, sometimes counseling can help. There are many programs and professionals who can offer you perspective and help you to bring order back to your life.

There are no set answers to "what ails you", but maybe just beginning to think about the health of your health can get you on the path to your best self.

# Bulletin

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Lyn E. Yakubov, MD Sean T. McGrath, MD

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Correspondence and changes of address should be mailed to the above address.

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# Calendar

November 7, 2015 Shinedown, Covelli Centre

November 11, 2015 Veterans' Day

November 26-27, 2015 Thanksgiving Holiday

December 3, 2015 Todd Eldredge, Covelli Centre

December 10-13, 2015 Disney on Ice, Covelli Centre

December 24-25, 2015 Christmas Holiday

January 1, 2016 New Year's Day

March 3, 2016 Alliance Annual Fashion Show

Maronite Center

March 17, 2016 Carrie Underwood, Covelli Centre

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# HOW WELL DO WE COMMUNICATE WITH OUR PATIENTS?

My niece injured her knee during a high school soccer game recently. My sister got the call that she needed to be taken to the hospital. She ended up at one of our local ER's after an hour ride home from the game. The doctor there did x-rays to rule out a fracture and examined her leg to make sure she was neurologically and vascularly intact. She was, and it was decided that she was now ready to move from an emergency situation to an outpatient f/u. The problem was they told her on this Saturday that she needed an MRI as soon as

possible. That was the statement my sister heard. So they sent her out with the name of a local pediatric orthopedist and the dire need to have an MRI as soon as possible because it was an emergency?!? This is where the confusion started because of mistaken communication. She was no longer in emergent need of anything as that was resolved by the care given in the ER. She now needed treatment for her soft tissue injury in an outpatient setting.

My sister calls me asking what to do. I say to f/u with the orthopedist and he will take care of any imaging that may be necessary. Her response of course was that an MRI was urgently necessary. I reiterated the surgeon would take care of whatever was needed and that a pre-cert was required for the MRI which may take some time. My sister then went to the appointment. She was shocked when he told her the MRI would be scheduled. She demanded it be done immediately. The surgeon then told my sister that's not how it works. This is all my sister remembers him saying and then leaving. This is what she heard. What was said could have been completely different, but it was ineffective communication as the Mother of the minor aged patient heard only the "No" and stopped listening.

Who can blame my sister when the ER told her it was absolutely necessary ASAP to get the MRI. Or, was that communication also ineffective and there was more to that conversation? I'm betting on the latter.

My sister was so concerned she even called the insurance company to try to move the MRI along faster. They said they have 15 days to review the request but a **simple** call from the doctor can move it faster. Funny, they always have an answer that gets them off the phone and creates more havoc and work for the doctor's office! I again told my sister it's not an emergency (FYI I'm the little brother so...). If the doctor called the insurance every time she ordered an MRI, she would never have time to see patients. I explained that there is protocol in place per the insurance how to order an MRI. We all follow that unless there is a true emergency, and then we send the patient to the ER!

As the purveyors of medical care and information, we need to make sure we communicate effectively with patients. It is important to remember that patients don't hear everything we say. When a person is dealing with a health issue, they are distracted often times by many emotions occurring all at once. We do need to be concise, but clear in our communication. We need to start with the most important things first, which would be the diagnosis and prognosis. Then we should deal with the plan and include the anticipated schedule and why that is. We should always let the patient know if it is urgent or something that we can take care of over time without concern. We simply need to lay it all out there in a treatment time table that is simple and understandable and includes reassurance that there is no emergency at hand when that is the case.

Please, to save me a headache next time, let's communicate with patients more effectively. Next time you are talking with a patient think about what she might be hearing and what her concerns are and address them. If you attack the issues effectively early on, then you and the patient can save time and undue stress down the road.

ISS NO



# I'm sorry....

Share everything; Play fair; Don't hit people; Put things back where you found them; Clean up your own mess; Don't take things that aren't yours; Say you're sorry when you hurt somebody. (All I Really Need to Know I Learned in Kindergarten; R. Fulghum).

Many things that we need to know and need to follow every day we did learn so long ago. But do we really know all that we need to about apology? The need for apology affects all of our relationships—personal and professional. However, do we ever stop to think if what we say is what they hear? Does the wronged party even take it as a valid apology? Do we say it right? Do we say it so that they know?

It turns out that there are actual languages of apology (<u>The Five Languages of Apology</u>; G. Chapman and J. Thomas). They: 1) Express regret (I am sorry); 2) Accept Responsibility (I was wrong); 3) Make restitution (What can I do to make it right?); 4) Express genuine repentance (I'll try not to do that again); or 5) Request forgiveness (Will you please forgive me?). Each person has his own way of accepting an apology. He waits to hear the words that—in his mind—mean that the offender is truly sorry. An apology that falls short is one that is not in their "language". Thus, it is not considered a full or valid apology and the issue still hangs in the air—unresolved. Without apology, anger can build and it may push us to demand justice.

Any apology is birthed in regret, but the party who is waiting to hear "I am sorry" wants you to feel some of his pain. He wants some evidence that you realize how deeply you have hurt him. If he does not hear your regret, he does not feel that a complete apology has been made.

The person wanting to hear "I was wrong" wants you to accept responsibility for your actions. But for many people, saying "I was wrong" is a sign of weakness. Intelligent people—they think—should always try to justify their actions as needed or as situationally justified. Mature adults break the bad and selfish patterns of childhood. They accept responsibility for all of their failures. Immature adults forever rationalize their own bad behavior.

Making restitution is what we often see in restaurants when poor service is apologized for by a free meal or a coupon for the next meal. When a wrong has been made, the person wanting to hear "What can I do to make it right?" thinks that it should be paid for. This may require repayment or restoration of something taken—even a good name.

Repentance means to walk away from a certain behavior. It means going 180 degrees in the opposite direction. It means a change. The offended party who wants to hear "I'll try not to do that again" wants to see a change (or a sincere attempt at a change) in behavior. She wants to see that an intent to change has been expressed, that a plan has been conceived, and that the plan has been or will be implemented. We see this all the time in the action plans from sentinel or "near miss" events as recorded in our own JCAHO logs. We know the drill from Morbidity and Mortality reports. But can we do this when we are the one who needs to change? Can we express intent followed by a plan followed by the implementation of that plan?

How do we ask for forgiveness? Some offended parties want to hear "Will you please forgive me?" Asking forgiveness is an admission of guilt. But to the injured party, asking forgiveness indicates that: 1) you want the relationship restored; 2) you realize that you have done something wrong; and 3) you are willing to put the future of the relationship squarely into the hands of the offended party. People who have a fear of losing control or of rejection or of failure have a problem mustering up this type of apology.

When we forgive, we pardon, take away the wrong, or extend grace to the other party. Oh yeah, we are often on the other side of this apology thing too! It takes just as much time and energy to learn to forgive as it does to learn another's language of apology and speak it well to them. It takes learning our own language. What do we consider an appropriate apology? When are we irked that the apology is not valid or that the issue is not "done".

As we steer our own ship through life we are bound to collide with others. How do we handle these episodes? Do we accept responsibility for our actions? Do we graciously pardon the actions of others? Some things we learned easily and early. Others take a lifetime to refine. What is your language of apology? How well do you speak another's?

Jyn & Yakubor no



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Dear Friends of the Alliance:

The Mahoning County Medical Society Alliance is planning their 12th Anniversary Champagne Brunch and Style Show. It will be held on Thursday, March 3, 2016, at the Maronite Center, Austintown.

Fashions will be presented by Lilly Pultizer of Legacy Village with Alliance members and their children featured as models. Proceeds from the event will benefit Children's Charities of the Mahoning Valley.

The Alliance is a volunteer organization comprised of physician spouses who provide support to the community through community service and fundraising. Over the past ten years we have donated to many community organizations, including the Garden of Hope at Akron Children's Hospital Mahoning Valley, the Midlothian Free Clinic, Beatitude House, the Silver Lining Cancer Fund, The Rich Center for Autism, the Juvenile Justice Center and Angels for Animals.

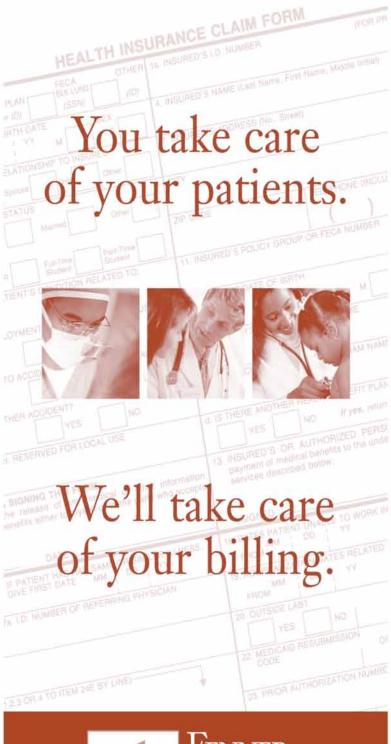
We are asking for your support, either through sponsorship, a gift donation for our chance auction, or by placing an ad in our program. If you would like to support our efforts, please contact Diana McDonald at rn.diana@gmail.com.

If you would like additional information, or would like to receive an invitation to this event, please contact one of the chairwomen or committee members.

On behalf of the Mahoning County Medical Society Alliance, thank you for your support.

Sincerely,

Diana McDonald MCMSA President





BILLING AT A HIGHER STANDARD

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# Bits 'n' Pieces

### MEMBERSHIP DUES BILLING

2016 Membership Dues have been mailed. If you have not received an invoice, please call the society office and one will be sent to you.

### MEMBERSHIP CHANGES

Dr. Justin Mistovich will be leaving Youngstown Orthopaedic Associates in November to join Rainbow Babies and Children's Hospital in Cleveland.

Dr. Joseph Jose will be leaving the area at the end of 2015 to practice in West Palm Beach, Florida.

## **ALLIANCE FASHION SHOW**

The MCMS Alliance Annual Champagne Brunch and Fashion Show will be held on Thursday, March 3, 2016, at the Maronite Center. Fashions from Lilly Pulitzer of Legacy Village will be modeled by Alliance members and their children. Information on sponsorship and advertising can be found in this issue of the *Bulletin*.

### COVELLI CENTRE TICKETS

Just a reminder that the society has Club Seats at the Covelli Centre which allows us to purchase up to 12 tickets for any event. Tickets are sold on a first-come, first-served basis, so if there is something you would like to see, please call the society office as soon as you hear the announcement. A limited number of parking and VIP passes are also available for those who buy tickets.

### **FOUNDATION LOANS AVAILABLE**

The Mahoning County Medical Society Foundation continues to grant low-interest loans to medical students from the Mahoning Valley. Loans range from \$2,000 to \$5,000 per year and are given at 1% below the Prime Rate at the time the loan is granted. Applicants must have completed at least one year of medical school and may reapply from year to year. If the loan recipient returns to practice in Mahoning or Trumbull County and becomes a member of the Mahoning Valley Medical Society, interest on the loan is forgiven. Applications for 2016 are available from the society office.

### WOULD YOU LIKE TO SERVE ON COUNCIL?

At-large council positions will become available for the 2016-2017 term at the end of December 2015. If you are interested in serving on council, please let Karyn know and she will forward your name to the Nominating Committee. There will also be a vacancy in the position of ValleyCare representative to council due to Dr. Joseph Jose leaving the area. If you are a physician employed by ValleyCare (Northside, Hillside Rehabilitation or Trumbull Memorial) and are interested, call the society office. We will also be looking for council members from Trumbull County.

# In Memoriam

Richard S. Richards, MD April 4, 1934~ September 14, 2015

# Midlothian Free Health Clinic Celebrates New Location with Ribbon Cutting

The Midlothian Free Health Clinic has moved to the lower level of the First Presbyterian Church, 201 Wick Avenue, in Youngstown. After losing their space in the Bethlehem Lutheran Church on Midlothian Blvd. when the church closed, the search began for new quarters. At the same time, Pastor Carolyn Griffeth of the First Presbyterian Church was looking for a new mission for the congregation. Through connections made by Midlothian Executive Director Maureen Cronin, Youngstown Mayor John McNally and Board Chair Jim Benedict, the two came together to bring the Free Health Clinic to the lower level of the church at 201 Wick Avenue. Proximity to the Youngstown State University campus has brought about further collaboration with the Bitonte College of Health Sciences, most notably the addition of Penguin Physical Therapy and the YSU Doctor of Physical Therapy Program. There is now physical therapy available to Midlothian patients.

The Midlothian Free Health Clinic opened its doors on March 27, 2008, after years of planning and organizing by a group of nurses from Bethlehem Lutheran Church in Youngstown and Christ Lutheran Church in Struthers. Under Medical Director Thomas E. Albani, Jr., MD, the clinic offers primary, preventative and educational health care to individuals between the ages of 18 and 64, and whose household income is within 200% of the federal poverty level. Services are absolutely free to individuals without health insurance coverage.

Donations provide the clinic with a large portion of the operating funds needed to provide services to a fast-growing sector of the community that experiences limited options for receiving health care. The clinic is a 501(c)(3) non-profit corporation and is administered by a volunteer board. Donations are tax deductible.

The clinic is open every 2nd and 4th Thursday from 6 PM to 10 PM and patients are seen by appointment. All of the doctors, nurses, health professionals and staff are volunteers. If you are interested in volunteering at the clinic, please call 330-787-4193. Volunteer physicians and other health professionals are always welcome.



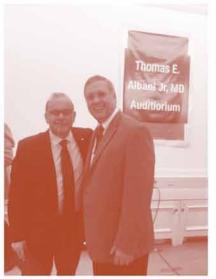
Left: YSU President Jim Tressel, Carol Beard, RN, Executive Director Maureen Cronin and Medical Director Tom Albani, MD, pose for a photo at the Midlothian Free Health Clinic ribbon cutting.

Right: Ed Hassay, board president of the Diabetes Partnership of the Mahoning Valley, presents a check to MFHC board president Jim Benedict and Executive Director Maureen Cronin.



Medical Director Dr. Tom Albani thanks everyone who mde the new Midlothian Free Health Clinic location a reality.





Dr. Joseph Mosca, Dean of the Bitonte College of Health Sciences and Dr. Tom Albani.

# NEW MEMBERS

# Michael J. Finamore, DO

Anesthesiology

Bel-Park Anesthesia Associates, Inc. 4135 Boardman Canfield Rd., Suite 101

Canfield, OH 44406

Medical Education: Ohio University Heritage College of Osteopathic

Medicine, Athens, OH UPMC Mercy, Pittsburgh, PA

Internship: UPMC Mercy, Pittsburgh, PA
Residency: West Penn Allegheny, Pittsburgh, PA

Fellowship: Cleveland Clinic Foundation, Cleveland, OH

# Kelly Grove Nigro, MD

Pathology/Cytopathology

Pathology Consultants, LLC 8166 Market St., Suite D Youngstown, OH 44512

Medical Education: Case Western Reserve University, Cleveland, OH

Internship: University Hospital Case Medical Center, Cleveland University Hospital Case Medical Center, Cleveland

Fellowship: University Hospital Case Medical Center, Cleveland

# Dominic J. Peters, MD

**Orthopaedic Surgery** 

Salem Regional Orthopaedics 1995 East State St.

Salem, OH 44460

Medical Education: NEOUCOM, Rootstown, OH

Internship: Michigan State University Kellogg Medical School,

Kalamazoo, MI

Residency: Michigan State University Kellogg Medical School,

Kalamazoo, MI

Fellowship: Hoag Orthopaedics, Irvine, CA

To the physicians - past and present - of the MCMS: As we continue our service to you and your families, just a short note of thanks this Thanksgiving holiday. Your tireless effort in helping keep us and our families healthy never goes unnoticed.

Ed Hassay

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# Ayan Sanyal, MD

Family Medicine/OB

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Medical Education: St. Georges University School of Medicine,

Grenada, West Indies

Internship: Northside Medical Center, Youngstown Northside Medical Center, Youngstown

Residency: Northside Medical Center, Youngsto

# Michael T. Tran, DO

Anesthesiology

Bel-Park Anesthesia Associates, Inc. 4135 Boardman Canfield Rd., Suite 101

Canfield, OH 44406

Medical Education: Western Unversity College of Osteopathic

Medicine of the Pacific, Pomona, CA Cleveland Clinic Foundation, Cleveland

Residency: Cleveland Clinic Foundation, Cleveland Fellowship: Cleveland Clinic Foundation, Cleveland

# David J. Widmyer, DO

Nephrology

Internship:

Associates in Nephrology, Ltd. 970 Windham Ct., Suite 6A Youngstown, OH 44512

Medical Education: Lake Erie College of Osteopathic

Medicine, Erie, PA

Internship: Albert Einstein College of Medicine,

Philadelphia, PA

Residency: Albert Einstein College of Medicine Fellowship: Albert Einstein College of Medicine

ROAD TO 10 PROGRAM PARTNERSHIPS



# **ICD-10 Transition Moves Forward**

Now that ICD-10 has been implemented, The Centers for Medicare and Medicaid Services (CMS) has been carefully monitoring the ICD-10 transition and is pleased to announce that claims have been processing normally.

You can find information on the first month of Medicare Fee-For-Service (FFS) claims processing in this <u>CMS Fact Sheet</u>.

### Keep Up to Date on ICD-10

Visit the <u>CMS ICD-10</u> website and <u>Roadto10.org</u> for the latest news and official resources, including the <u>ICD-10 Quick Start Guide</u> and a <u>contact list for provider Medicare and Medicaid guestions.</u>

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