

From President Sutton When Opportunity Meets Preparation



A well-known osteopathic physician once told a tale of how to deliver a baby. She reminded us at our ACOI Convention in 2016 that we all learned how to deliver a

baby in medical school. If this image is what you think of:



You might be the right doctor for the job. If the image below is what you think of when asked to deliver a baby:



You likely need some help from someone with more skill in obstetrics. This does not make you any less of a doctor.

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Bylaws Change Would Ease Fellow Nomination Process

The members of the ACOI will consider a Bylaws change in October that would broaden the requirements for those seeking the honorary degree of ACOI Fellow. The revisions would not change the qualifications for Fellowship. They would redefine who may nominate candidates and how the nominations occur. The changes are proposed in response to the growth of the profession and the fact that many ACOI members are practicing in areas where there are few or no ACOI fellows to support their nominations.

To be considered at present, a candidate must be nominated by a current Fellow and endorsed by a second Fellow, both of whom must write letters that outline the attributes and qualifications of the candidate. The proposed revisions would not change the requirements for the primary sponsor. They would, however, permit that the secondary sponsor be a physician colleague who attests by signature to the candidate's qualifications. The secondary sponsor could be a DO or MD in any specialty.

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AOBIM Announces Changes in OCC Requirements

The AOBIM has announced that as of October 1, 2017, it will no longer require self-assessment activities as part of the OCC process. The AOBIM will be removing the OCC point system from this process, as well. The following OCC components will be required to remain compliant in OCC and maintain AOBIM certification:

- Component 1 (licensure): Maintain an active state medical licensure.
- Component 2 (CME): Complete 120 credits of continuing medical education, 50 of which must be specialty-specific, during the three-year CME cycle.
- Component 3 (OCC Cognitive Assessment): At least once during the certification period, diplomates must sit for and pass the written cognitive assessment exam. AOBIM diplomates may choose to sit for the exam up to two years prior to the certification expiration date.
- Component 4 (Practice Performance Assessment): AOBIM diplomates are not required to report this until 2019.
- Component 5 (AOA Membership): Maintain current AOA membership.

These requirements will be in effect through the end of the current CME cycle, which ends December 31, 2018. Further changes are planned after that time and will be announced when approved by the AOA. For additional information, contact Dan Hart, AOA Director of Certification in Internal Medicine, at DHart@osteopathic.org.

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American College of Osteopathic Internists

In Service to All Members; All Members in Service

MISSION

The mission of the ACOI is to promote high quality, distinctive osteopathic care of the adult.

VISION

The ACOI seeks to be the organization that osteopathic internists think of first for education, information, representation and service to the profession.

VALUES

To accomplish its vision and mission, the ACOI will base its decisions and actions on the following core values:

LEADERSHIP for the advancement of osteopathic medicine

EXCELLENCE in programs and services

INTEGRITY in decision-making and actions

PROFESSIONALISM in all interactions

SERVICE to meet member needs

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Letter from the President

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This is not your field of expertise.

This tale was intended to indicate that as osteopathic internal medicine physicians, we do not have the skills to do everything in medicine. We all have something about which we are skillful. As an example, when I review a series of thyroid labs, I know the next step and then the next step. I know how to deliver a thyroid consultation. I know how to investigate a thyroid nodule, as well. I know what to do. I am the man for that job. On the other hand, the last time I delivered a baby was in 1989.

There was a report recently in the Wall Street Journal about “lucky” and ‘unlucky’ people as evaluated by Richard Wiseman, a psychologist. He gave self-identified lucky and unlucky people a newspaper that included images. These people were asked to report how many images were in the paper. The “lucky” people took a few seconds to get the correct answer, but the self-described unlucky people took about two minutes. The difference was that the “lucky” people found a note on page two of the paper that stated the image total.

I do not believe in luck. I am leery of saying to someone about an upcoming exam, “Good luck.” I am more like the Roman philosopher Seneca. He proposed that luck was when opportunity meets preparation. There is no luck at all, just action.

This is what the ACOI is all about. We are your home base for training and skills development in osteopathic internal medicine. Osteopathic internal medicine skills development is built on the structure of the Tenets of Osteopathic Medicine:

- The body is a unit; the person is a unit of body, mind, and spirit;
- The body is capable of self-regulation, self-healing, and health maintenance;
- Structure and function are reciprocally interrelated;
- Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, and the interrelationship of structure and function.



The founding of the first osteopathic medical school in Kirksville, Missouri, 125 years old this year, was all about preparation meeting opportunity. Skill, not luck.

Andrew Taylor Still experienced the loss of family

members in the modern healthcare setting of that era, which pushed him to investigate and seek alternatives. Over the following 125 years, osteopathic physicians have built on those treatment skills and knowledge base. We have trained and continue to train and update our knowledge in osteopathic internal medicine and its specialties. We are continuously trying to dig to the bottom of any complicated medical diagnosis with sound medical science. Other specialties outside of internal medicine frequently look to us for the complicated answers.

We at the ACOI want to be home base for preparation in osteopathic internal medicine, in support of post graduate training and continuing medical education. We aim to be the Go-To place for osteopathic internists. Let us know how we can help and support you.

My year as President of the ACOI is coming to an end. I want to thank the ACOI membership and Board for allowing me to have the opportunity to serve. It has been a great honor. I have worked hard in the ramps up to this year, and I will continue to work hard in support of osteopathic internists. The ACOI is home base for me. It is family for me. It is about friends for me. Thank you, thank you, thank you for your trust in me.

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government RELATIONS

Timothy McNichol, JD

Agreement Keeps Government Funded and Provides Down Payment on Emergency Relief

The President recently signed into law legislation to keep the federal government funded through December 8. The \$15.25 billion package provides emergency funds to assist with Hurricane Harvey recovery and expands the federal debt limit to ensure the government can keep its lights on and doors open beyond September 30. The bipartisan legislation was achieved following an agreement reached by President Trump and Democratic leaders. Additional legislation will be needed to respond to the far-reaching damage caused by Hurricane Irma.

Significant challenges lie ahead as Congress works to fund the government for the remainder of Fiscal Year 2018 while it tries to advance numerous other complex policy initiatives. The deal reached by the President and Democratic leaders provides only a temporary reprieve from the myriad of challenges that lie ahead. If history is any indication, it is likely that legislative activities for the remainder of the year will continue to be marked by significant disagreement greatly slowing the process in most instances.

ACA Repeal Legislation Remains on the Table

The opportunity for the Senate to approve legislation to repeal the Affordable Care Act (ACA) is rapidly coming to an end under current options. The Senate previously approved budget reconciliation instructions that allow the Senate to approve ACA repeal legislation by a simple majority if certain budgetary requirements are met. The Senate Parliamentarian recently indicated that the budget reconciliation provisions will expire on September 30 with the conclusion of the 2017 Fiscal Year. While the Senate could approve new reconciliation instructions for the purpose of approving ACA repeal legislation, the process will be complicated by efforts to use reconciliation instructions to enact tax reforms. While another effort to approve ACA repeal legislation is being led by Senators Bill Cassidy (R-LA) and Lindsey Graham (R-SC) prior to September 30, it is highly unlikely that the Senate leadership has the desire for another bruising vote on health care repeal. The Senate's last attempt to repeal the ACA failed by one vote. One possible area for bipartisan agreement exists in efforts to stabilize the current insurance marketplaces. The ACOI will continue to monitor the situation closely.

Medicare Backlog Fight Continues

The Court of Appeals for the District of Columbia Circuit Court recently vacated a lower court decision requiring the Department of Health and Human Services (HHS) to clear its Medicare claims appeals backlog by 2020. The appeals court found that the lower court did not adequately consider HHS' argument that it is simply impossible to clear the backlog under the timeline in light of current budget levels. HHS was directed by the lower court to reduce the current backlog by 30 percent at the end of 2017; by 60 percent at the end of 2018; by 90 percent at the end of 2019; and in full by the end of 2020. The lower court can reinstate the previously required timeline by finding that HHS did not fulfill its burden of demonstrating impossibility. The backlog of Medicare claims is now estimated to be more than 600,000, totaling more than \$6.16 billion in value.

Number of Uninsured Continues to Decline

According to a new report released by the Centers for Disease Control and Prevention (CDC), the number of uninsured Americans continues to decline. The report found that during the first three months of 2017, about 20.1 million Americans were without insurance coverage. This represents a decline of 20.5 million people since 2010. The report found that the highest number of uninsured people are between 25 and 34 years of age. You can read more about the CDC's findings by visiting www.cdc.gov.

Washington Tidbits Trying Times Are Not New

As Congress returns from its August recess it will be confronted by a number of challenges, both foreign and domestic. Overcoming these challenges is at the core of the American experience.

When Congress convened 230 years ago on September 20, 1787, it discussed whether members of the Constitutional Convention should be censured for approving the Constitution on September 17, 1787. It was argued that the purpose of the Convention was only to revise the Articles of Confederation, not create a new form of government! Following extended debate, Congress on September 28 decided not to censure Convention participants and directed the state legislatures to call ratification conventions allowing for the public to be informed of the new form of government and participate in its development. Delaware was the first state to ratify the document on December 2 by unanimous vote. It was not until June 21, 1788 that New Hampshire became the ninth state to ratify the Constitution allowing it to take effect. Rhode Island was the last state to ratify the Constitution on May 29, 1790 only after being threatened with being treated as a foreign government. While it may take time and effort, our government of the people and for the people continues to push forward, "in order to form a more perfect union."



coding CORNER

Jill M. Young, CPC, CEDC, CIMC

The ACOI Coding Corner is a column written by Jill M. Young, CPC, CEDC, CIMC. Ms. Young is the Principal of Young Medical Consulting, LLC. She has over 30 years of experience in all areas of medical practice, including coding and billing. Additional information on these and other topics are available at www.acoi.org and by contacting Ms. Young at YoungMedConsult@aol.com.

The information provided here applies to Medicare coding. Be sure to check with local insurance carriers to determine if private insurers follow Medicare's lead in all coding matters.

The Importance of Past Family History

This month, we will look at past, family and social history as we work our way through the documentation elements of an evaluation and management (E&M) visit. As I said last month, one must remember that the extent of history of present illness (HPI), review of systems (ROS) and past, family and social history (PFSH) that is obtained and documented is dependent upon clinical judgement and the nature of the presenting problem(s).

The history is unique from the Exam and Medical Decision Making (MDM) component of an E&M visit. For a complete history, a new patient requires information from all three of the history areas (HPI, ROS and PFSH). The same circumstance for an established patient requires information only from two areas.

History of Present Illness (HPI)	Review of Symptoms (ROS)	Past, Family and/or Social History (PFSH)	Type of History
Brief	N/A	N/A	Focused
Brief	Problem Pertinent	N/A	Expanded Problem Focused
Extended	Extended	Pertinent	Detailed
Extended	Complete	Complete	Comprehensive

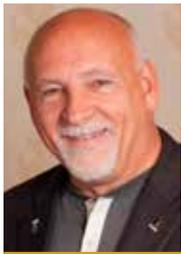
As you can see from the chart from the 1995 Guidelines, two of the types of history for an E&M service (problem focused and expanded problem focused) do not need any PFSH. That is the technical side of PFSH, but what about the practical side?

Looking at the behaviors encompassed in social history, I see additional challenges. When asking a patient about smoking history, it is not just about current smoking habits, but whether they ever smoked. It is not just about asking if they have smoked cigarettes, but whether they smoked other products as well. In some instances, this may now include other legal items such as marijuana. In the world of electronic medical records (EMR), there is a checkbox for "smoking," but does it cover all the questions that this section encompasses? Where does vaping get a check mark in the electronic record? I am frequently critical of EMR systems and their limitations for this reason. In this one section, several pieces of valuable information are reduced to a single check mark. Does the next person looking at the lone checkmark by "smoking negative" assume all the above questions were

asked and the answers were no to all of them? Or, was it no to the ones that were asked? Was the simple question of "do you smoke" the only one asked and is that what the checkbox showing a negative answer represents? Good questions to which there are no clear answers.

Both the 1995 and 1997 E&M Guidelines state that family history is: "A review of medical events in the patient's family, including diseases which may be hereditary or place the patient at risk." Statements of "non-contributory" and "unremarkable" do not indicate what questions were asked of the patient, or if there were there any positive responses that the author was discounting. It is for this reason that these two statements are not acceptable documentation according to the Centers for Medicare and Medicaid Services (CMS). Again, write what the patient is asked and then document specific, valid information about the family history. If either the chief complaint or ROS elicits a positive finding, it should be one of the topics of discussion about family members included in the PFSH.

I do appreciate the frustration physicians feel about obtaining a family history on a 90-year-old patient. Frequently, the information gleaned from the conversation is not as specific as one might want because of the memory of the patient, or the lack of detailed medical information that was available 50 or 60 years ago. That does not mean the questions should not be asked and answers documented in the family history section. Depending on the completeness of the rest of the visit, not having a family history documented could cause the note to be down coded from a new patient to an established patient. This would result in a significant loss of reimbursement.



talking science & education

Donald S. Nelinson, PhD

Welcome to the September edition of Talking Science and Education. Well, ACOI members, I don't know about you, but summer slipped away just a bit too quickly for my liking. I'm very happy to announce that Dr. Doug Zakolski of Michigan was the first person to respond correctly to last month's trivia question. Congratulations, Doug. You should have received your prize by now. Our question last month asked: Which of the following is TRUE about the United States:

- a) In the past three years, drug deaths increased 15%, from 12.2 to 14.0 deaths per 100,000 population.
- b) In the past four years, smoking increased 30%, from 21.6% to 28.1%.
- c) In the past year, HPV immunization among males aged 13 to 17 years decreased 7%, from 21.1% to 19.7%.
- d) In the past four years, obesity decreased 7%, from 21.1% to 19.7%.

The unfortunate, but correct, answer is (a). More than six out of 10 drug deaths involved an opioid (prescription pain relievers or heroin). The total cost of illicit drug use on the U.S. economy is estimated to be \$193 billion per year.

OK, folks, let's see how you do with this week's population health trivia. Remember, data is drawn from 2016 surveys.

Which of the following is FALSE about the United States:

- a) In the past year, public health funding increased 9%, from \$86 to \$94 per person.
- b) In the past year, the percentage of the population without health insurance decreased 19%, from 13.1% to 10.6%.
- c) In the past year, preventable hospitalizations decreased 13%, from 57.6 to 49.9 discharges per 1000 Medicare enrollees.
- d) In the past year, premature death decreased from 7,054 to 6,997 years lost per 100,000 population.

Please email your response to me at don@acoj.org. Remember: we do give VALUABLE prizes, and if you're thinking of going to Google for the answer.....DON'T!!

Talking Education

As osteopathic physicians, you made a conscious decision to practice medicine from a holistic perspective: the unity of body, mind, and spirit. The osteopathic practices and principles you follow are the cornerstone of what is simply good medicine. With the unification of training to a single GME accreditation system, programs (residencies and fellowships) have the opportunity to preserve this important distinction by seeking osteopathic recognition (OR) with ACGME. The process is not onerous; there are no fees involved; and it is the most important way we can maintain the impact of osteopathic care throughout the graduate medical training process. Finally, there is help ready and waiting for program directors. The ACOI OR Toolbox is available on our website. In addition, at no cost to programs, I stand ready, willing, and able to work with programs to secure OR. To date, we have 16 internal medicine programs with OR and four more awaiting review by the Osteopathic Principles Committee at ACGME this month. The AOA's Council on OGME also has resources at <http://www.osteopathic.org/inside-aoa/single-gme-accreditation-system/osteopathic-recognition/Pages/default.aspx>.

We urge all program directors to seek OR. For those of you who may not be directly related to a training program, but know others who are, we encourage you to advocate for this important designation.

Diabetes Dialogues---Artificial Sweeteners Trick the Brain!

New research may help explain the reported link between the use of artificial sweeteners and diabetes, scientists say. Researchers at Yale University School of Medicine say that in nature the intensity of sweetness reflects the amount of energy present. But in modern-day life, the body's metabolism is fooled when a beverage is either too sweet or not sweet enough for the amount of calories it contains.

That means that a sweet-tasting, lower-calorie drink can trigger a greater metabolic response than a drink with higher calories. "A calorie is not a calorie," explained senior author Dana Small, a professor of psychiatry.

"The assumption that more calories trigger greater metabolic and brain response is wrong. Calories are only half of the equation; sweet taste perception is the other half," Dr. Small said.

When a "mismatch" occurs, the brain's reward circuits don't register that calories have been consumed, the researchers said. Many processed foods have such mismatches, such as yogurt with low-calorie sweeteners.

"Our bodies evolved to efficiently use the energy sources available in nature," Small said. "Our modern food environment is characterized by energy sources our bodies have never seen before."

Small and her colleagues said the study may help explain the link between some artificial sweeteners and diabetes discovered in previous research. The topic remains controversial, however, and experts agree more research needs to be done.

The study was published August 10 in the journal *Current Biology*.

Member Milestones

Jennifer LeComte, DO, FACP, FAAP, is the new Division Chief of General Internal Medicine at Rowan Medicine in Stratford, NJ. A 2006 graduate of the Philadelphia College of Osteopathic Medicine, Dr. LeComte is certified by both the American Board of Internal Medicine and the American Board of Pediatrics.

Before joining Rowan Medicine, Dr. LeComte held several leadership roles at Christiana Care Health System, including medical director of the Transition of Care Practice and the Pediatric Program Practice. She also served as the assistant medical director of the Adult Medicine Office. At Christiana, Dr. LeComte held faculty positions in Internal Medicine, Pediatrics, and Med-Peds. Along with a number of faculty positions, Dr. LeComte was the clinical leader for attaining NCQA certification as Delaware's first multi-site Level 2 Patient Centered Medical Home.

Have You Moved?

Keep us updated.

If you have recently made any changes

in your address, phone number or email, please notify

**theACOI at
www.acoi.org.**

75th Anniversary Campaign Update \$435,600 In Gifts and Pledges

(As of September 1, 2017)

A special 75th Anniversary Campaign brochure that outlines a Vision for ACOI after 2020 was mailed to ACOI members in late August. The past two years have been a period of rapid change with many challenges, almost all of which have been created by forces outside of the ACOI's control. An organization's success is determined by how it turns challenges into opportunities. Members of the ACOI should be confident that the leadership of the College is taking the steps needed for the organization---and osteopathic internal medicine---to emerge stronger than before.

This campaign is not to build a building or establish a scholarship program, it is to fund a once-in-a-lifetime idea to benefit and preserve osteopathic internal medicine. It requires contributions far greater than those made through dues renewal and conference registrations. For the first time, the College must secure four-, five- and six-figure major gifts and pledges from individuals, medical practices, and institutions to achieve the balance of our \$750,000 goal and we are succeeding.

Our thanks to the 75th Anniversary Campaign Committee listed below for their leadership and generosity to help insure the campaign's success.

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If you would like to support the 75th Anniversary Campaign and be recognized on this special Honor Roll of Donors, please email Barbara@acoi.org, or [click on this link](#) to print the campaign pledge card and return to the ACOI office at 11400 Rockville Pike, Suite 801, Rockville, MD 20852.

Donors who contribute \$1,000 or more will be recognized in ACOI print/electronic materials, on the ACOI website, with an autographed copy of the ACOI 75th Anniversary history book, and be honored on the 75th Anniversary Circle Tree, or Donor Wall of Honor in the ACOI office depending on level of commitment. Campaign donors will be recognized and honored at special events at the 2017 ACOI Convention in the Washington, DC area.

The ACOI is grateful for the generous support of the donors listed on the following page.

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In Memoriam

Word has been received of the following deaths of ACOI member:

Word has been received of the death of **Harvey A. Salem, DO** of Chadds Ford, PA. Dr. Salem died on June 15 at the age of 80. A 1964 graduate of the Philadelphia College of Osteopathic Medicine, Dr. Salem completed his internship and residency training at TriCounty Hospital in Springfield, PA. He was an ACOI Active member for more than 40 years.

New Members Welcomed

The ACOI Board of Directors and staff welcome the following members whose membership applications or changes in membership status have been approved by the Credentials Committee and Board of Directors.

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Christopher Webster, DO
Jonathan Whitaker, DO
Sandy Zambrano, DO

Associate Membership:

Aurelio Muyot, MD

Bylaws

continued from page 1

The Bylaws change will be considered by those Active members of the College who are present for the Annual Meeting of Members on Sunday, Oct. 15, at the conclusion of the Annual Convention in National Harbor, MD. The full text of the Bylaws change appears below.

ARTICLE III: FELLOWS, MASTER FELLOWS AND HONORARY FELLOWS

Section 1. Requirements for the Degree of Fellow. The Board of Directors may award the title of "Fellow" to one who meets the following requirements:

1. Certification by the American Osteopathic Board of Internal Medicine or the American Board of Internal Medicine;
2. Active ACOI, Inc., membership in good standing for the two-year period preceding nomination;
3. Possession of active medical license in good standing;
4. Demonstration of continuing professional accomplishments and scholarship;
5. Documentation of continuing professional activities, which may include teaching, membership and service to regional and national professional organizations, hospital committee work, research, participation as both teacher and student in continuing medical education activities, significant achievement in the practice of osteopathic medicine and service to the public and community.

To be considered, a candidate must be nominated and ~~seconded by two~~ BY A fellow of the ACOI, Inc. AND ENDORSED BY A SECOND PHYSICIAN COLLEAGUE, WHO MAY OR MAY NOT BE A FELLOW OF THE ACOI. ~~Both~~ The primary proposer ~~and the endorser~~ must submit A substantive letters addressing the character, ethics and professional achievements of the candidate, including contributions in clinical, teaching or research areas. The letters must make specific reference to the above-listed criteria and describe those attributes and activities which make the candidate deserving of this honor. THE SECONDARY ENDORSER MUST ATTEST TO THESE ATTRIBUTES AND ACTIVITIES BY SIGNATURE ON THE NOMINATION FORM.

A completed application includes a nomination form signed by the candidate, ~~and~~ primary sponsor, AND ENDORSER, A letters from the primary ~~and secondary~~ sponsors and the candidate's curriculum vitae.

The Executive Director will maintain an updated list of those members of the College who are eligible for nomination. This list shall be provided to the fellows of the College each year. Completed applications must be returned to the office of the executive director by a date specified and publicized to the fellows. The applications will be reviewed under a process determined by the Board of Directors. After the review and approval of candidates by the Board of Directors, the list of approved nominees will be mailed to all members of the Conclave of Fellows for their advice and consent. Members of the Conclave must return any written, dissenting comments within thirty (30) days of transmittal of the list of nominees. If no dissenting responses are received, the nominees and their sponsors shall be notified of their selection for induction into the Conclave of Fellows at the forthcoming annual meeting. In the event of dissenting comments, the nomination will be reevaluated in a timely manner by the Board of Directors. The Board will notify in writing the nominee and sponsor of a nominee whose candidacy is not approved under this process.

Fellows are authorized to use the designation "FACOI" for as long as they remain members in good standing of the College.

Three Keynotes 2017 Highlight Convention Program



ZDoggMD

The 2017 ACOI Convention and Scientific Sessions, which will take place October 11-15 in the Washington, DC, suburb of National Harbor, MD,

will feature three exceptional keynote speakers who should appeal to all segments of the membership.

Internist, writer and performer of comedic rap parodies--**ZDoggMD**, will open the convention on Thursday morning, Oct. 12. Zubin Damania, MD is the founder of Turntable Health, a direct primary care clinic in Las Vegas. Before moving to Las Vegas, Dr. Damania was a practicing hospitalist at Stanford University for 10 years. He has been writing and performing comedic raps as ZDoggMD, an internet celebrity known for his music videos, parodies, and comedy sketches about medical issues, as well as systemic issues with healthcare.



Vance Johnson

The second keynote on Friday, Oct. 13, will feature **Vance Johnson**, a former NFL wide receiver for the Denver Broncos who appeared in three Super Bowls. Follow-

ing his 10-year pro football career, Mr. Johnson began to struggle with alcoholism, which ultimately led to a 26-day alcohol-induced coma

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Keynotes

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that almost took his life. He credits the care provided by an osteopathic internist, ACOI member Mark Twardowski, DO, for saving his life. Since completing treatment for addiction and domestic abuse, he has turned his focus to helping others in the same situation.



JD Polk, DO

The final keynote will take place on Saturday, Oct. 14, and will feature **J.D. Polk, DO, MS, MMM, CPE, FACOEP**, the Chief Health and Medical Officer of

NASA, the National Aeronautics and Space Administration. Dr. Polk served with the Department of Homeland Security and was the Chief of Space Medicine for NASA's Johnson Space Center in Houston before assuming his current position in November, 2016. He will speak on the Journey of Exploration: Where Medicine Meets Mars."

Dr. Polk is well published in the fields of emergency medicine, disaster medicine, space medicine, and medical management. He has received numerous awards and commendations, including citations from the FBI, White House Medical Unit, Association of Air Medical Services, U.S. Air Force, and has received the NASA Center Director's Commendation, the NASA Exceptional Service Medal, the National Security and International Affairs Medal and the NASA Exceptional Achievement Medal.

Registration materials and additional information about the program are available at

www.acoi.org.

Letter from the President

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Osteopathic Internist in the Trenches

Marianne Holler, DO, FACOI, holds a BA from Georgian Court University in NJ and also attended Maywood University in PA. She received an MSW from Fordham University. Her DO degree is from UMDNJ-COM (now Rowan SOM). Her internal medicine internship and residency were at Kennedy University Hospital/Lourdes Health System. Dr. Holler is certified by the American Osteopathic Board of Internal Medicine in Internal Medicine and in hospice and palliative medicine. She is a Clinical Assistant Professor of Medicine at Rowan University SOM. She is a Fellow of the American College of Osteopathic Internists. Additional awards include: the ACOI Humanism

and Excellence in Teaching Award, 2006; the NJ BIZ Healthcare Hero Physician of the Year, 2013; South Jersey Magazine Top Doc, 2013-16; South Jersey BIZ Who's Who in Healthcare Top 25, 2014; Excellence in Caring Award Community Medical Center, 2017. She has been on the Alumni Board of Directors of Georgian Court University and has served on hospital committees, including chairing of the Ethics Committee at her institution. She has served internationally in clinics in Honduras, Guatemala and Uganda.

Dr. Holler is currently Chief Medical Officer for VNA Health Group in Holmdel, NJ. She previously worked as Medical Director of Hospice and Palliative Medicine Programs with VNA Health Group-Ocean County Division. Prior to that she was team physician/Palliative Medicine Fellowship Director at Samaritan Healthcare & Hospice in Marlton, NJ.

Dr. Holler has lectured as a visiting professor for the ACOI at multiple colleges of osteopathic medicine on palliative care topics. She has given local community, national and international lectures in her specialty over the years.

Dr. Holler reports her story as follows: "I am one of eight children (definitely shaped my world view). Additionally, we always had one or two foster children who lived with us the entire time I was growing up. Palliative/hospice was a natural choice for a career because I was raised as a team member. Palliative medicine is definitely a team sport. I rely on social work, nursing, pastoral support to help understand how my patients may be suffering in all its forms...physical, medical, spiritual, emotional, etc. My parents were strong proponents of the notion that everyone has something to contribute. Half of us went to college and half didn't (by choice). Many of my siblings and their children are teachers. Remember, there would be no good doctors without good teachers. I was a social worker for 18 years and went to medical school at age 40. It was interesting to be in the classroom with students 15-18 years younger than me.

"I love what I do. In palliative medicine it is important that I understand all the different specialties, what they are trying to accomplish, what the family and patient understand, and what is the overall goal. I try to discuss the possibilities and the probabilities as it relates to prognosis and choices for treatment. "

Please, join me in celebrating Marianne Holler, DO, FACOI as the September Internist in the Trenches. God Bless the Osteopathic Internist!

*John Sutton, DO, FACOI, FACE, CCD
President*

Tax and Estate Planning Seminar at Annual Convention



Sandy Macnab, FAHP, CFRE

In our continuing series of estate planning seminars at the ACOI Annual Convention, **Sandy Macnab, FAHP,**

CFRE, President, Alexander Macnab & Co., will present “Gaining through Giving - Doing Well While Doing Good,” a Sunrise Session on Friday, October 13. Mr. Macnab is a nationally recognized planned giving consultant to associations, medical societies, and nonprofit organizations who is now ACOI’s Planning Giving Counsel.

Attendees will learn how they can help themselves (and their families) and help ACOI at the same time. This session will provide an executive overview of how charitable gifts can help you with tax and estate planning issues. You will also learn about ways that you can make gifts that can return income for your life, or that can help your children, or grandchildren. While you will get information on the basics, the session will focus on two plans that will give you money back and go on to help ACOI programs.

NEW THIS YEAR - Sandy Macnab will be available for no cost private consultations with ACOI members on Friday, October 13 and Saturday, October 14. Sign up for a consultation at the ACOI Development Table during convention.

PROFESSIONAL OPPORTUNITIES

INTERNAL MEDICINE ASSOCIATE POSITION AVAILABLE - Florida. Busy solo IM practice seeking a new graduate who is excited about learning how to remain profitable in private practice. Office hours only and no hospital rounds. Plenty of cultural events, theater, shopping, fantastic dining and outdoor activities year round are a plus for this area. Must be BC/BE and have FL licensure. Relocation stipend included in package as well as health insurance and 401K program. Interested applicants may send resume to drb@drbnaples.com. More information can be provided by Denise Maclean, practice mgr at Denise@DrbNaples.com.

CARDIOLOGIST - New York. Northwell Health’s Cardiology Service Line is seeking a Fellowship-trained Non-Invasive Cardiologist (MD/DO) to join our Cardiology team serving Seaford, Long Island.

Northwell Health’s Cardiology Service Line has seen tremendous growth over the past five years within Long Island, New York City and Westchester; with the goal of providing comprehensive, integrated health care and wellness services.

As we expand our cardiovascular health services across the Health System, the Health System is seeking dynamic BC/BE non-invasive cardiologists to join select practices in Long Island. We offer a competitive salary and benefits package. In addition, an academic appointment with the Hofstra Northwell School of Medicine is commensurate with credentials and experience.

The ideal candidate will be Board Certified/Eligible in Cardiology and Echocardiography. Nuclear Cardiology certification is desirable.

To make the transition as smooth as possible, you will have partners who have a wealth of experience in all the specialty areas of cardiology. Moreover, you will have access to the expertise of the largest health system in the New York Metropolitan area.

Northwell Health is dedicated to advancing heart care through providing access to exclusive clinical trials, developing groundbreaking treatments and leading the way in novel research that redefines care. By participating in research and exclusive clinical trials, our physicians are able to provide patients with medical treatments of the future, today.

For further information please contact the Office of Physician Recruitment at OPR@northwell.edu.

EOE M/F/D/V

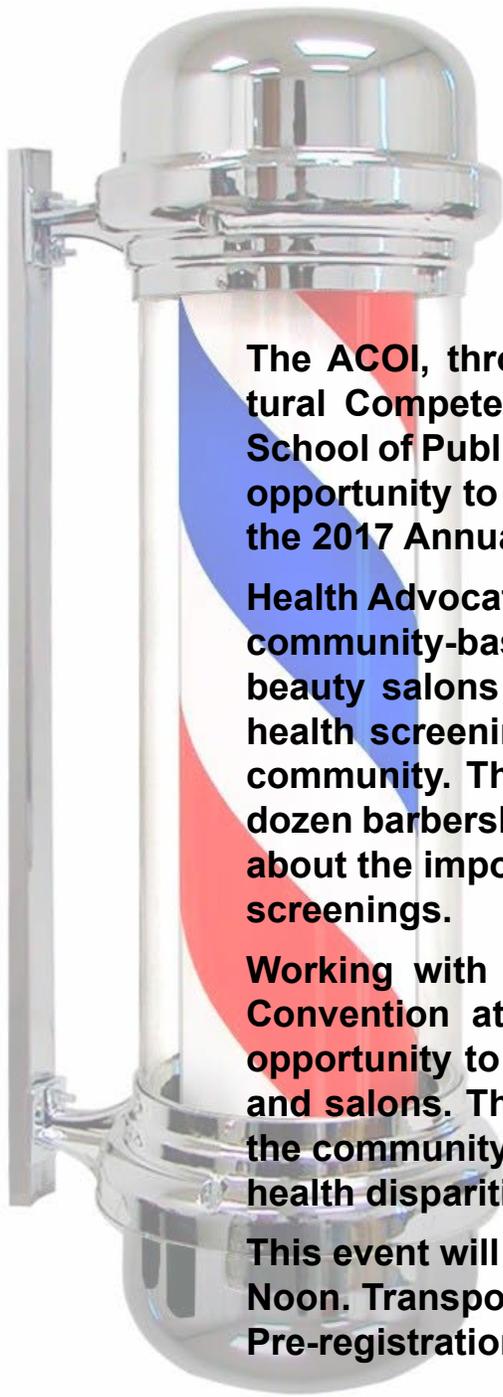


Nominations for ACOI Leadership Positions Announced

The ACOI Nominating Committee has announced the slate of candidates for election at the Annual Meeting of Members scheduled for Sunday, October 15 in National Harbor, MD. The Committee has nominated **Annette T. Carron, DO**, for President-Elect and **Samuel K. Snyder, DO**, for Secretary-Treasurer. The Nominating Committee also approved five candidates for election to the Board of Directors. Incumbents **Damon Baker, DO**, **Robert DiGiovanni, DO**, and **Joanne Kaiser-Smith, DO** are nominated for new three-year terms. **Susan Enright, DO** and **Amita Vasoya, DO**, complete the slate.

Under the College’s Bylaws, this year’s President-Elect, **Martin C. Burke, DO**, will be inaugurated as President for the 2017-2018 year at the conclusion of the elections. The Nominating Committee this year is chaired by **Robert G. Good, DO**. Also serving are **Michael Adornetto, DO**, and **Robert Cain, DO**.

Any Active member of the ACOI may nominate other qualified candidates by submitting the nomination to the Executive Director. Such nominations must be supported by the signatures of 30 Active members of the College; they also must include a brief statement of qualifications and must be received no later than 30 days prior to the date of the election. Further information is available from the Executive Director.



ACOI Teams with the University of Maryland School of Public Health for a Community Service Opportunity

The ACOI, through its Committee on Minority Health and Cultural Competency, is working with the University of Maryland School of Public Health-Center for Health Equity to offer a special opportunity to participate in a community service project during the 2017 Annual Convention and Scientific Sessions.

Health Advocates In-Reach and Research (HAIR) is a successful, community-based intervention that engages barbershops and beauty salons as culturally relevant portals for the delivery of health screenings, education and medical services in the local community. The program has provided training to more than a dozen barbershop and salon owners, who talk to their customers about the importance of seeking out routine care and preventive screenings.

Working with the University of Maryland, the ACOI will offer Convention attendees, including residents and students, the opportunity to visit several of these locally-owned barbershops and salons. The visit will allow you to engage with members of the community and share your skills and talents to help address health disparities and to advance health equity.

This event will take place on Saturday, October 14, from 8 AM-12 Noon. Transportation is provided. Space is limited. Pre-registration is required.

**American College of Osteopathic Internists
Annual Convention & Scientific Sessions
Oct 11-15, 2017 • Gaylord National Resort
& Convention Center • National Harbor, MD**



**American College of Osteopathic Internists Annual Convention and Scientific Sessions
(Held in conjunction with the Annual Clinical Assembly of American College of Osteopathic Surgeons)
Oct. 11-15, 2017**

**Gaylord National Resort & Convention Center, National Harbor, MD
“Goldilocks Medicine: Not Too Little; Not Too Much” - Annette T. Carron, DO, FACOI, Program Chair**

Wednesday, October 11, 2017

8:00 AM – 4:30 PM	How to Supplement Your Clinical Income with Lucrative Home-Based Work <i>Steven Babitsky, Esq., SEAK, Inc.</i> (Separate Registration; Non-CME)
8:00 – 8:30 AM	Registration
8:30 – 10:30 AM	Niche Consulting
10:30 – 10:45 AM	Break and Networking Opportunity
10:45 – 12:00 AM	Writing/Teaching
12:00 PM – 1:00 PM	Lunch (on your own)
1:00 - 2:30 PM	File Review Consulting
2:30 – 2:45 PM	Break and Networking Opportunity
2:45 – 4:30 PM	Medical-Legal Consulting

9:00 AM – 12:00 PM	Practice Management Symposium
9:00 AM – 9:40 AM	Medicare Access and CHIP Reauthorization Act Update (MACRA) <i>Dale W. Bratzler, DO, MACOI</i>
9:40 AM – 10:20 AM	Telemedicine and Cybersecurity <i>Jon M. White, MD</i>

10:20 AM – 10:35 AM	BREAK
10:35 AM – 11:20 AM	Longitudinal Care <i>Robert A. Cain, DO, FACOI</i>

11:20 AM – 11:55 AM	Establishing and Operating a Successful Concierge Practice <i>Sheila Mints, JD</i>
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11:55 AM – 12:00 PM	Q&A with Panel
11:00 AM – 12:00 PM	New Member and First-Time Attendee Orientation
	Q&A with ACOI Board of Directors <i>John R. Sutton, DO, FACOI, President</i>

12:00 PM – 1:00 PM	Lunch Break (on your own)
1:00 PM – 3:30 PM	PLENARY SESSION – Cardiology/ Gastroenterology/Infectious Diseases <i>Martin C. Burke, DO, FACOI,</i> <i>Cardiology Moderator</i> <i>Nathan J. Landesman, DO, FACOI,</i> <i>Gastroenterology Moderator</i>

1:00 PM – 1:30 PM	Role of Endoscopic Evaluation to Assist Anticoagulation Planning <i>Kevin P. Dolehide, DO, FACOI</i>
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1:30 PM – 2:30 PM	Anticoagulant Management Around Endoscopy: Specialist Views <i>Martin C. Burke, DO, FACOI</i> <i>Nathan J. Landesman, DO, FACOI</i>
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2:00 PM - 3:00 PM	Military Physicians Forum
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2:30 PM – 3:00 PM	Antibiotic Prophylaxis for GI Endoscopy- GI Perspective <i>Jack D. Bragg, DO, MACOI</i>
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3:00 PM – 3:25 PM	Antibiotic Prophylaxis for GI Endoscopy- ID Perspective <i>Mark Alain Dery, DO, FACOI</i>
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3:25 PM – 3:30 PM	BREAK - Q & A with Panel
3:30 PM – 4:45 PM	PLENARY SESSION – Rheumatology <i>Robert L. DiGiovanni, DO, FACOI, Moderator</i>

3:30 PM – 4:15 PM	State of the Art Clinical, Lab & Imaging – Treatments of RA <i>Aaron B. Heath, DO</i>
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4:15 PM – 4:45 PM	Best Practice Initial Treatment of SLE & GCA <i>Jeanine M. Martin, DO</i>
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4:45 PM – 5:45 PM	Tests I Wish You'd Never Ordered <i>Gerald W. Blackburn, DO, MACOI, Moderator</i> <i>Michael J. James, DO, FACOI</i> <i>William Peppo, DO, FACOI</i> <i>Stephen J. Sokalski, DO, FACOI</i>
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6:00 PM - 7:30 PM	Welcome Reception
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Thursday, October 12, 2017

7:00 AM - 8:00 AM	SUNRISE SESSIONS 1) Public Health Emergencies: Use of Real Time Mobile Communications <i>Alfred F. Sorbello, DO, FACOI</i>
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	2) Hospitalist Nephrology <i>John E. Prior, DO, FACOI</i>
	3) Handling OIG and Insurance Company Billing Investigations <i>Sheila Mints, JD</i>

8:00 AM – 8:15 AM	PLENARY SESSIONS with ACOS WELCOME/OPENING REMARKS <i>John R. Sutton, DO, FACOI, President</i> <i>Scott Blickensderfer, DO, ACOS President</i> <i>Annette T. Carron, DO, FACOI, Program Chair</i>
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8:15 AM - 9:30 AM	PLENARY SESSION – KEYNOTE Healthcare Remixed <i>Zubin Damania, MD (AKA – ZDoggMD)</i>
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9:30AM – 10:00 AM	EXHIBIT BREAK
10:00 AM – 12:00 PM	PLENARY SESSION – Gastroenterology <i>Nathan J. Landesman, DO, FACOI,</i> <i>ACOI Moderator</i> <i>Robert J. Marx, DO, FACOS, ACOS Moderator</i>

10:00 AM – 10:30 AM	GERD, Diagnostic Testing <i>Stephen M. Hoffman, DO, FACOI</i>
10:30 AM – 11:00 AM	Practices and Pitfalls in Reflux Surgery <i>J.P. Smith, DO, FACOS</i>

11:00 AM – 11:30 AM	Managing GI Complications of Diabetes Mellitus <i>Nathan J. Landesman, DO, FACOI</i>
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11:30 AM – 12:00 PM	Determining Appropriate Surgery for Esophageal Cancer <i>Peter Baik, DO</i>
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12:00 PM - 12:15 PM	Q&A with Panel
12:15 PM - 1:15 PM	LUNCHEON SYMPOSIUM Influencing Cardiovascular Risk With Antihyperglycemic Agents-Focus on SGLT2 Inhibitors and Incretin-Based Therapies <i>Robert J. Chilton, DO, FACOI</i>

1:15 PM – 3:30 PM	PLENARY SESSION – Pulmonary/Oncology <i>Kevin P. Hubbard, DO, MACOI</i> <i>Andrea C. Cooley, DO, FACOS</i> <i>Co-Moderators</i>
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1:15 PM – 2:00 PM	Appropriate Use of Mastectomy <i>Speaker TBD</i>
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2:00 PM – 2:45 PM	Lung Cancer Diagnosis and Treatment <i>Kevin P. Hubbard, DO, MACOI</i>
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2:45 PM – 3:20 PM	Overuse of Imaging in the Initial Staging and Surveillance of Cancer <i>Amanda Laubenthal, DO</i>
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3:20 PM – 3:30 PM	Q&A with Panel
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3:30 PM – 3:45 PM	BREAK
3:45 PM – 6:00 PM	PLENARY SESSION - Cardiology <i>Martin C. Burke, DO, FACOI</i> <i>ACOI Moderator</i> <i>Andrea C. Cooley, DO, FACOS</i> <i>ACOS Moderator</i>

3:45 PM – 4:15 PM	Heart Failure Due to Reduced Ejection Fraction: Medical Management <i>David Allen, DO</i>
4:15 PM – 4:40 PM	Corrective Surgery in Severe Heart Failure <i>Jonathan Enlow, DO</i>
4:40 PM – 5:00 PM	Diagnosis and Treatment of AFib: What's New? <i>Martin C. Burke, DO, FACOI</i>
5:00 PM - 5:20 PM	COX IV vs Lesser Surgical Ablations <i>Rachel Harrison, MD</i>
5:20 PM – 5:40 PM	Hybrid Maze Procedure and Protocol <i>Andrea C. Cooley, DO, FACOS</i>
5:40 PM – 6:00 PM	Q&A with Panel
	BREAKOUTS
4:15 PM – 5:00 PM	Resident Research Presentations <i>Samuel K. Snyder, DO, FACOI, Moderator</i>
5:00 PM - 6:00 PM	Women Physicians Discussion Group <i>Joanne Kaiser-Smith, DO, FACOI ACOI Moderator ACOS Moderators, TBD</i>
5:30 PM - 7:30 PM	Alumni Receptions

Friday, October 13, 2017

7:00 AM - 8:00 AM	SUNRISE SESSIONS 1) Pet-Related Infections <i>Laurie A. Welton, DO</i> 2) Estate Planning <i>Alexander Mcnab</i> 3) Anticoagulation in the Hospital <i>Mary Jo Voepel, DO, FACOI</i>
8:00 AM – 9:00 AM	PLENARY SESSION - KEYNOTE (with ACOS) My Life Was Saved by Osteopathic Care <i>Vance Johnson, former NFL wide-receiver</i>
9:00 AM – 12:00 PM	PLENARY SESSION Pulmonary/CCM/Sleep Medicine <i>Patrick C. Cullinan, DO, FACOI, Moderator</i>
9:00 AM – 9:40 AM	Simulation Training in Critical Care <i>Christopher R. Brackney, DO, FACOI</i>
9:40 AM – 10:20 AM	Novel Anticoagulants <i>Patrick C. Cullinan, DO, FACOI</i>
10:20 AM – 10:45 AM	EXHIBIT BREAK
10:45 AM – 11:20 AM	Acute HF: Diuretics to LVAD and Everything in Between <i>George G. Sokos, DO</i>
11:20 AM – 11:55 AM	The Role of Extracorporeal Membrane Oxygenations (ECMO) <i>L. Keith Scott, MD, MS</i>
11:55 AM – 12:00 PM	Q&A with Panel

9:00 AM – 12:00 PM	RESIDENCY PROGRAM TRAINERS Special Session <i>Susan M. Enright, DO, FACOI Joanne Kaiser-Smith, DO, FACOI Co-Moderators</i>
9:00 AM - 9:05 AM	Welcome and Introductions <i>Susan M. Enright, DO, FACOI</i>
9:05 AM - 10:00 AM	Bringing Students Up to Speed as They Enter Residency <i>Philip C. Dittmar, MD</i>
10:00 AM - 11:00 AM	Resident Coaching and Mentoring <i>Michael T. Melia, MD</i>
11:00 AM - 11:45 AM	How to Expand Your Residency Program Through Veterans Access, Choice And Accountability Act <i>Anthony P. Albanese, MD</i>
11:45 AM - 12:00 PM	Q&A with Faculty
12:00 PM -1:00 PM	Osteopathic Recognition Consultations <i>Donald S. Nelinson, PhD</i>

9:00 AM – 4:00 PM	BREAKOUT RESIDENT/FELLOW/STUDENT SESSIONS (& RECEPTION) <i>Scott L. Girard, DO, FACOI, Sara Ancello, DO, Christopher J. Sciamanna, DO Co-Moderators</i>
9:00 AM – 9:45 AM	Delivering Bad News <i>Keith A. Reich, DO, FACOI</i>
9:45 AM – 10:15 AM	Physician Wellness/Wellbeing <i>Angela Aboutalib, MD</i>
10:15 AM – 10:30 AM	BREAK
10:30 AM – 11:00 AM	Emotional Intelligence <i>Sara Ancello, DO</i>
11:00 AM – 12:00 PM	#PerfectingYourCraft: The Importance of Team Leadership and the Resilient Self <i>David Pierre, DO</i>
12:00 PM – 12:45 PM	Lunch Reception (with IM and Fellowship Program Directors)
12:45 PM – 1:45 PM	RESIDENT/FELLOW BREAKOUT Medical Jeopardy <i>Scott L. Girard, DO, FACOI Christopher J. Sciamanna, DO Sara Ancello, DO</i>
1:45 PM – 2:30 PM	Top 10 Things to Know When Starting in Practice <i>Tammie Zwick (US Acute Care)</i>
	STUDENT BREAKOUT <i>Robert G. Good, DO, FACOI, Moderator</i>
12:45 PM – 1:45 PM	ACGME Update <i>Susan M. Enright, DO, FACOI Joanne Kaiser-Smith, DO, FACOI</i>
1:45 PM – 2:30 PM	Top 10 Tips on How to be a Successful Student and Get Your Residency Program <i>Susan M. Enright, DO, FACOI Joanne Kaiser-Smith, DO, FACOI</i>
2:30 PM – 3:30 PM	Letters of Recommendation, Personal Statements and Interviewing, Oh My! <i>Christopher J. Sciamanna, DO, FACOI Susan M. Enright, DO, FACOI</i>
3:30 PM - 4:00 PM	Open Forum with Students and ACOI Leaders <i>Robert G. Good, DO, FACOI Susan M. Enright, DO, FACOI Joanne Kaiser-Smith, DO, FACOI</i>
12:00 PM - 1:00 PM	LUNCHEON SYMPOSIUM Atrial Fibrillation: Revisiting Key Controversies in an Era of Innovation <i>Frederick A. Schaller, DO, MACOI</i>
1:00 PM - 2:45 PM	PLENARY SESSION Allergy/Immunology <i>Julie Sterbank, DO, FACOI, Moderator</i>
1:00 PM – 1:50 PM	Immune System of Skin: A Review of Biologicals <i>Robert W. Hostoffer, DO, FACOI</i>
1:50 PM – 2:40 PM	Hereditary Angioedema <i>Brian P. Peppers, DO</i>
2:40 PM – 2:45 PM	Q&A with Panel
2:45 PM - 5:15 PM	PLENARY SESSIONS (Endocrine) <i>Louis E. Haenel, IV, DO, FACOI, Moderator</i>
2:45 PM – 3:30 PM	Emerging Treatment of Diabetes <i>Gregory Barone, DO</i>
3:30 PM – 3:45 PM	BREAK
3:45 PM – 4:30 PM	Metabolic Bone Disease: Therapeutic Measures <i>James N. Fitzpatrick, DO, FACOI</i>
4:30 PM – 5:00 PM	Current Technologies in Insulin Pumps/Sensors <i>Alan B. Schorr, DO</i>
5:00 PM – 5:15 PM	Q&A with Panel
6:00 PM - 8:00 PM	Convocation of Fellows and Reception

Saturday, October 14, 2017

7:00 AM - 8:00 AM

**Subspecialty Section Business Meetings
(40 minute lecture/20 minute business meeting)**
 Allergy – *Robert W. Hostoffer, DO, FACOI*
 Cardiology – *Martin C. Burke, DO, FACOI*
 •The Path to Repatha: Patient Selection, Program Needs
 Michael B. Clearfield, DO, FACOI
 Endocrine – *Louis E. Haenel, IV, DO, FACOI*
 • Endocrine Case Presentations
 Gastroenterology – *Nathan J. Landesman DO, FACOI*
 Geriatric Medicine – *Annette T. Carron, DO, FACOI*
 Hematology/Oncology – *Amanda Laubenthal, DO*
 Infectious Disease – *Mia A. Taormina, DO, FACOI*
 Nephrology – *Mark D. Baldwin, DO, FACOI*
Jeffery Packer, DO, FACOI
 • Nephrology Case Presentations
John E. Prior, DO, FACOI
 Nuclear Medicine – *James C. Clouse, DO, FACOI*
 Palliative Medicine – *Marianne M. Holler, DO, FACOI*
 Pulmonary/CCM/Sleep Medicine
Daniel L. Maxwell DO, FACOI
 • Update on Sleep Medicine
 Rheumatology – *Robert L. DiGiovanni, DO, FACOI*
Keith A. Reich, DO, FACOI
 • Unknowns in a Thieves' Market –
 Case Presentations

7:00 AM - 8:00 AM

SUNRISE SESSIONS
 1) Sepsis in the Hospital
Mia A. Taormina, DO, FACOI
 2) Washington Update
Timothy W. McNichol, JD

8:00 AM – 12:00 PM

Barbershop Medicine
 Underserved Community Service Activity
 Pre-Registration Required

8:00 AM – 9:00 AM

**PLENARY SESSION
KEYNOTE (with ACOS)**
 The Journey of Exploration:
 Where Medicine Meets Mars
*JD Polk, DO, Chief Health and
Medical Officer (NASA)*

8:00 AM – 9:00 AM

PLENARY SESSION – Nuclear Medicine
James C. Clouse, DO, FACOI, Moderator

9:00 AM – 9:45 AM

Hepatobiliary Scintigraphy in Patients with Clinically
 Perplexing Abdominal Complaints
Mark Tulchinsky, MD

9:45 AM- 10:30 AM

PLENARY SESSION – Infectious Disease
Mia A. Taormina, DO, FACOI, Moderator

9:45 AM – 10:15 AM

Prophylactic Antibiotic Use in Surgery:
 What Do the Data Say?
Mia A. Taormina, DO, FACOI

10:15 AM - 10:30 AM

BREAK

10:30 AM – 11:00 AM

Evaluation of the Post-Operative
 Febrile Patient
MarkAlain Dery, DO, FACOI

11:00 AM – 12:15 PM

**PLENARY SESSION
Hematology/Oncology**
Amanda Laubenthal, DO, Moderator

11:00 AM – 11:35 AM

Transfusion Medicine Update & Review
Yelena E. Kier, DO

11:35 AM – 12:10 AM

The ASH Choosing Wisely Campaign: IVC Filters
Kevin P. Hubbard, DO, MACOI

12:10 PM – 12:15 PM

Q&A with Panel

9:15 AM –5:00 PM

**SPECIAL BREAKOUT SESSION
State Licensure Requirements**

9:15 AM – 10:15 AM

Managing the Opioid Epidemic
Robert G. Good, DO, FACOI

10:15 AM – 10:30 AM

BREAK

10:30 AM – 12:00 PM

Ethics
Mitchell D. Forman, DO, FACOI
Weldon D. Havens, MD, JD

1:00 PM – 2:00 PM

Quality and Safety
David V. Condoluci, DO, MACOI

2:00 AM – 3:00 PM

AIDS/HIV
MarkAlain Dery, DO, FACOI

3:00 AM – 4:00 PM

Human Trafficking
Hanni Stoklosa, MD, MPH

4:00 PM – 5:00 PM

Intimate Partner Violence
Michelle R. Mendez, DO

12:15 PM - 1:15 PM

LUNCHEON SYMPOSIUM
 TBD

1:15 PM – 3:00 PM

PLENARY SESSION – Nephrology
Mark D. Baldwin, DO, FACOI
Jeffrey Packer, DO, FACOI, Co-Moderators

1:15 PM – 1:50 PM

Hypertension
William J. Elliott, MD, PhD

1:50 PM – 2:20 PM

Too Much or Too Little Concern –
 The Latest on Contrast and the Kidney
Jeffrey Packer, DO, FACOI

2:20 PM – 2:50 PM

PPIs, ACE/ARB
Mark D. Baldwin, DO, FACOI

2:50 PM – 3:00 PM

Q&A with Panel

3:00 PM - 3:15 PM

BREAK

3:15 PM - 5:15 PM

PLENARY SESSION – Geriatric/Palliative

3:15 PM – 5:00 PM

Being Mortal
Megan Knight, Moderator
Marianne M. Holler, DO, FACOI
Theresita Silverberg-Urian, RN, BSN, CHPN

5:00 PM – 5:15 PM

Q&A with Panel

Sunday, October 15, 2017

7:30 AM –9:30 AM

PLENARY SESSION – REMS SESSION

Opioid Prescribing:
 Safe Practice, Changing Lives
Annette T. Carron, DO, FACOI

9:30 AM - 10:00 AM

Annual Meeting of Members

10:00 AM

Convention Concludes

**Schedule subject to change*

CME CALENDAR

Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

- 2017 Annual Convention & Scientific Sessions
Oct 11-15 Gaylord National Resort and Convention Center, Washington, DC
- 2018 Annual Convention & Scientific Sessions
Oct 17-21 Orlando World Center Marriott, Orlando, FL
- 2018 Internal Medicine Board Review Course - April 25-29
- 2018 Clinical Challenges in Inpatient Care - April 26-29
- 2018 Exploring New Science in Cardiovascular Medicine - April 27-29
- 2018 Congress on Medical Education for Resident Trainers - April 27-28
Chicago Marriott Downtown Magnificent Mile, Chicago, IL
- 2019 Annual Convention & Scientific Sessions
Oct 30- Nov 3 JW Marriott Desert Ridge Resort & Spa, Phoenix, AZ
- 2020 Annual Convention & Scientific Sessions
Oct 21-25 Marco Island Marriott Beach Resort, Marco Island, FL
- 2021 Annual Convention & Scientific Sessions
Sept 29-Oct 3 Marriott Marquis Hotel, San Francisco, CA

Please note: It is an ACOI membership requirement that Active Members attend the Annual Convention or an ACOI-sponsored continuing education program at least once every three years.

Information on any meeting listed here may be obtained from ACOI Headquarters at 800 327-5183 or from our website at www.acoi.org.

2017 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination

Computerized Examination 200 Sites Nationwide
September 14, 2017 - *Application Deadline: Expired*
Late Application Deadline: Expired

Internal Medicine Recertifying Examination

Computerized Examination 200 Sites Nationwide
September 15, 2017 - *Application Deadline: Expired*
Late Application Deadline: Expired

Subspecialty Certifying Examinations

Computerized Examination 200 Sites Nationwide
August 29, 2017 - *Application Deadline: Expired*
Late Application Deadline: Expired

- Cardiology • Clinical Cardiac Electrophysiology • Endocrinology • Gastroenterology
- Geriatric Medicine • Hematology • Hospice and Palliative Medicine • Infectious Disease
- Oncology • Pulmonary Diseases • Rheumatology • Sleep Medicine

Subspecialty Recertifying Examinations

Computerized Examination 200 Sites Nationwide
August 29, 2017 - *Application Deadline: Expired*
Late Application Deadline: Expired

- Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology
- Gastroenterology • Geriatric Medicine • Hematology • Hospice and Palliative Medicine
- Infectious Disease • Interventional Cardiology • Nephrology • Oncology
- Pulmonary Diseases • Rheumatology • Sleep Medicine

Further information and application materials are available by contacting Daniel Hart, AOBIM Director of Certification at admin@aobim.org; 312 202-8274.

Contact the AOBIM at admin@aobim.org for deadlines and dates for the Hospice and Palliative Care, Pain Medicine, Undersea/Hyperbaric Medicine and Correctional Medicine examinations.

AOA Seeks VP of Certifying Board Services

The AOA is seeking a new Vice President of Certifying Board Services (CBS). The Vice President of CBS is a key contributor to the AOA's strategic vision and serves as a member of its senior leadership team. This individual is the business leader for the evaluation and improvement of all specialty certification board programs related to assessment, measurement, and continuing certification. The vice president will lead the organization in ensuring a compelling application and certification experience that continually improves physician engagement with the AOA. The role includes responsibility for the quality and delivery of the board certification processes, interrelated psychometric policies, processes and communications, activities for the 18 Certifying Boards and nine Joint Examination Committees, as well as staff development, marketing and financial management of the division.

Interested candidates must be a DO who is certified by an AOA certifying board. For further information, contact Lindsey Hochman at lhochman@qlksearch.com or 312-604-7067.