

From President Burke

The Principle-Centered Medicine Double Down



The house of cards that is the U.S. “health care” system continues to re-direct capital away from the act of doctoring. We are slowly plodding toward a

crisis in patient care consequent to the misguided financial payment policies buried within the largely unread Affordable Care Act. The pendulum needs a force to propel movement back to core values for the doctor-patient relationship. Principle –Centered Medicine™ can be the catalyst of such a movement, and we already practice as well as believe in it.

This year’s internal medicine residency graduates have now distributed themselves into practices and fellowships naturally. Interestingly, and a bit disturbing, is the breakdown of their choices, where 37% went into subspecialty fellowships (stable to lower); 42% into Hospital Medicine (higher) and a mere 11% into office-based traditional practice.

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October 17-21, 2018 in Orlando, Florida

Osteopathic Internal Medicine: The Next 75 Years



The ACOI’s biggest education event of the year, the 2018 Convention and Scientific Sessions, is just days away. A record-breaking number of attendees is expected, as pre-registration is at an all-time high. Join your colleagues and friends in Orlando for

an opportunity to learn exactly what you need to know to keep pace with change and advance your career.

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ABIM Delays Program Director Certification Requirement

The American Board of Internal Medicine (ABIM) has pushed back to 2022 the implementation date of its controversial policy requiring program directors to be ABIM-certified in order to attest to resident competency to sit for ABIM certification. The policy, which stands in direct contradiction to the ACGME policy recognizing AOA certification of residency program directors, originally was scheduled to take effect in 2020.

ACOI, the AOA and others have been working to convince the ABIM to drop the requirement. None of the other allopathic certifying boards has announced an intent to adopt a similar position. More information about the ABIM announcement may be found at <https://www.abim.org/certification/policies/general/special-training-policies.aspx>. This, and other topics, will be addressed at a special session for medical educators planned for the ACOI Convention in Orlando.

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ACOI ANNUAL CONVENTION & SCIENTIFIC SESSIONS
Registration Now Open! See Pages 11-16 for more information



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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We are out of balance and with structural dysfunction (Still). The market speaks volumes and hospital medicine is a bubble that is ripe to burst. The ACOI and its Board fully support our hospitalists and have gone so far as to create for them uniquely-focused CME options and even a satellite program within the annual convention. Hospital Medicine has a clear value and place in patient care. However, the misguided policies of the non-physician class has decimated the traditional doctor-patient primary care office culture. Ironically, this is occurring as trends in healthcare are moving to ambulatory (non-hospital), less invasive options for patients. The apparent complete neglect of the Affordable Care Act to value private office-based practice and continuity of care is its real failure and we must counteract it with force.

Such a force is Principle-Centered Medicine™ that primarily values the doctor and the patient in every medical interaction, whether in the office, hospital or subspecialty lab. Being true to why you pursued medicine is at the heart of our principle that treats the whole patient as an individual from inception to final rest. It's managed by a dignified and professional team as a continuum that finds a way to deliver care to all patients regardless of their ability or background. Our principles and practice deduce using all our senses, including touch, to heal. Your confidence to heal is a perpetual evolution that fuels the core principle. "Become Who You Are" (Nietzsche) and double down on Principle-Centered care! The ACOI is already there and securely at home beating the house using principle as a reflection of your daily work.

Annual Convention

The 2018 ACOI Convention Program Chair, Robert L. DiGiovanni DO, FACOI, has selected a theme of "ACOI the next 75 years." As we emerge from our 75th year anniversary celebration and craft our brand for the next 75 years, we continue to develop CME that embodies Principle-Centered Medicine™ for every interested physician, resident-physician and student-doctor. The merger with the ACGME is rapidly coming to finality and our coming together for half a week in October remains the core principles platform for the ACOI and its members. This year, the convention will, itself, be our best and biggest program, as each year proves, due to the progressive nature of the ACOI and our community's medical philosophy and practice.

Over the course of the week, there will be many internal medicine, surgical and practice management topics from which to choose. Multiple subspecialty presentations are also planned and embody the principles of patient focused care familiar to us all. Please join us for the welcome reception on Wednesday as we celebrate the incoming President of the ACOI, Annette T. Carron, DO, FACOI.

It is my hope that you will think of ACOI as your learning Home Base: **the go-to source for education and fellowship** within a Principle-Centered Medicine family. I am at your service to help connect you in any and all ways.

In closing, I hope that your summer has been refreshing and safe. It is hard to believe that my year as your President is nearly over. The ACOI has made great strides this year by broadening its CME offerings, including on-line development, identifying core principles and partnering with the AOBIM to begin the process of creating a more reasonable and metric -driven certification process in Internal Medicine. It continues to be a privilege for me, so thank you for all your support.

Respectfully submitted,

Martin C. Burke, DO, FACOI, President



government RELATIONS

Timothy McNichol, JD

ACOI and Others Support Reducing Administrative Burdens Under Medicare

The ACOI joined with other physician organizations in support of the Centers for Medicare and Medicaid Services' (CMS) Patient over Paperwork Initiative and some of the resulting proposals contained in the recent Medicare physician payment proposed rule. The initiative is intended to reduce the administrative burdens physicians and others experience allowing them to devote more time to patient care. As examples, the proposed rule would allow: changing the required documentation of the patient's history to focus only on the interval history since the previous visit; eliminating the requirement for physicians to re-document information that has already been documented in the patient's record by practice staff or by the patient; and removing the need to justify providing a home visit instead of an office visit.

While there are some components of the proposed rule that are beneficial, such as those outlined above, we also raised some concerns. Specifically the proposed rule would collapse eight Evaluation and Management (E/M) office visit services for new and established patients down to two each. We are concerned that this effort to simplify the coding process could lead to unintended consequences and ultimately adversely impact patient care. (See this month's Coping with Coding column for more information.) The final rule addressing these and many other areas is expected out later this fall. You can view the full letter sent to CMS by visiting <https://www.acoi.org/advocacy/legislative-and-regulatory-comments>.

Opioid Legislation Approved by the Senate

The Senate recently approved legislation to address the growing opioid epidemic. The legislation approved by the Senate received overwhelming bipartisan support and was approved by a vote of 99 - 1. The approval of this legislation comes on the heels of similar legislation being approved by the House in June. The House and Senate are currently working to reconcile the two differing legislative packages with the intent of sending a final package approved by both chambers to the President's desk for signature. Among other things, the legislation would do the following: speed the approval of new non-addictive medical products to treat pain or addiction; improve the detection and seizure of illegal drugs; strengthen the training of first responders to use naloxone; provide funding to establish or operate comprehensive opioid recovery centers; and allow physicians who meet certain training requirements to provide medication-assisted treatment. House and Senate negotiations are ongoing. It is expected that a final opioid package will be sent to the President's desk before the end of the year. The ACOI is continuing to monitor this legislation.

Administration Eases Process to Claim Hardship Exemption Under the ACA

CMS recently announced guidelines easing the process for people to claim a hardship exemption from the individual mandate established under the Affordable Care Act (ACA). The new guidelines will allow those without health insurance in 2018 to avoid penalties by claiming a hardship exemption through federal tax filings for the 2018 tax year. Documenting evidence or a written

explanation will not be required to apply for the exemption. Legislation passed in 2017 zeroed out the penalty beginning in 2019. The penalty for not carrying health insurance coverage in 2018 is \$695 per adult and \$347.50 per child under the age of 18, with a maximum amount payable. The Administration's announcement of this new policy is consistent with its ongoing efforts to rescind parts of the ACA through the regulatory process.

FDA Releases Guidance for Device Makers

The Food and Drug Administration (FDA) released guidance for medical device makers to assist in reducing the amount of review time required to attain approval for their products. The guidance documents addressed the role of third-party reviewers and discussed how the use of jointly agreed-upon standards can be used to reduce regulatory barriers. The new guidance is intended to put in place a process that will require less paperwork and, ultimately, cut down on review time for medical device review and approval. The announcement of the new guidance documents followed the FDA's recent decision to approve two Apple watch apps designed to monitor heart rhythms and notify the user of an irregular heartbeat. You can learn more by visiting www.fda.gov.

CDC Report Finds Slight Decline in Rate of Uninsured

According to a new report released by the Centers for Disease Control (CDC), the percentage of uninsured Americans declined slightly to 8.8 percent (28.3 million) for the first quarter of 2018. In 2017, there was an uninsured rate of approximately 9.1 percent (29.3 million). In all, the number of uninsured Americans is down by more than 20 million since 2010. According to the report, the largest segment of the population lacking health insurance coverage is adults age 18 to 64. Of all those with insurance coverage, 65.8 percent

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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.

Waiting on the 2019 Medicare Physicians Fee Schedule Final Rule... A Few Thoughts

The recently released proposed changes to the Medicare Physician Fee Schedule for 2019 have generated a lot of talk and created a fair amount of angst. We must now wait until November for the release of the final rule in order to adequately plan our billing and coding activities for next year. As we wait for the final rule, here are a few things to remember:

1. This proposal is ONLY for office visits.
2. You do not HAVE to make any change in your current documentation habits. Under the proposed plan you can continue to use the 1995 and 1997 Evaluation and Management (E/M) Guidelines.
3. One of the proposed options is the use of time in selecting your E/M level of coding. It is a simplified use of current time rules. With the showing of medical necessity, only total time needs to be documented (no other notation).
4. Included in the proposal are two new add-on codes to use to account for visit complexity inherent in E/M services associated with primary medical care services and specialty services.
5. The proposal also provides for one payment amount for codes 99202-99205 (new patients) and codes 99212-99215 (established patients). Your reimbursement may go up under the proposed rule if you currently bill a significant number of 99203 and 99213 visits. The new rate will result in approximately \$25 and \$19 more respectively under the new system. Unfortunately, if you are billing 99204 and 99214 visits your reimbursement will go down \$22 and 16, respectively.

Once the final rule is released, we will review it closely to properly prepare for billing and coding in 2019.

Government Relations

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obtain their coverage through the private market. You can learn more about the report by visiting <https://www.cdc.gov/nchs/fastats/health-insurance.htm>.

Washington Tidbits

The Supreme Court...

Advice and Consent

Article III, Section 1 of the US Constitution provides, "The judicial power of the United States, shall be vested in one Supreme Court..." Article II, section 2 provides that the President shall appoint judges of the Supreme Court with the advice and consent of the Senate. Since the establishment of the Supreme Court in 1789, 163 nominations for a life-time appointment to the Court have been submitted for consideration. To date, 125 nominations have been confirmed; 12 nominations were rejected; 12 nominations were withdrawn; and, no action was taken on 10 nominations. The US Senate is currently considering the nomination of Brett Kavanaugh to fill the seat vacated by Justice Kennedy. Under which category will his nomination be filed? Only time will tell!



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.

Active Members:

- David Abel, DO
- Joseph Cihlar, DO
- Tara Eastin, DO
- Brandon French, DO
- James Hemsley, DO
- Michael Javid, DO
- Christina Liro, DO
- Sarah Rashid, DO
- Yasser Samra, DO
- Amy Wang, DO
- Jacqueline Wesolow, DO



talking science & education

Donald S. Nelinson, PhD

Greetings colleagues and welcome to the October, 2018 issue of Talking Science and Education. Well, the autumn has arrived, and like many of you, we at ACOI are very excited for the upcoming Annual Convention and Scientific Sessions in Orlando.

In last month's population health quiz we asked which of the listed states has fewer than 45 dentists per 100,000 population. With many correct answers submitted, the prize for August's quiz goes to the first correct respondent. Again, Dr. Peter Ankrom of Tennessee is our winner for knowing that Delaware is the correct answer. Keep an eye out for your prizes! Alabama, Arkansas, and Mississippi also have fewer than 45 dentists per 100,000 population.

For this month, we ask which two states listed below experienced the largest rank improvements since last year on the list of healthiest states?

- A. Florida
- B. Ohio
- C. Utah
- D. Minnesota

Remember: no Googling!!!

Send your answer to don@acoi.org.

Talking Education

As clinicians, we often rely on evidence-based medicine in helping to determine a diagnosis and treatment plan. As medical educators, I fear we are less stringent in our pursuit of evidence-based education: what works to change knowledge, attitudes, and behaviors? In a recent viewpoint published in JAMA by Dr. Graham McMahon, CEO of ACCME, and Dr. Susan Skochelak of the AMA, they point out that rather than gathering for informational updates, most physicians are seeking opportunities to convene to practice skills, receive feedback, glean wisdom and interact¹. The authors further note how innovation in CME can be promoted through regulatory alignment: fewer requirements and more options.

At this year's annual convention, I will be offering a highly interactive sunrise session entitled Evidence-based Education: We've Talked the Talk; Now Let's Walk the Walk. In it we will explore and develop implementation strategies around three proven approaches to changing physician behavior through CME: interactivity; enabling interventions; and longitudinal interventions². In addition, we will leverage the work of Joseph Prochaska's stages of readiness and Everett Roger's diffusion of innovation³. The session will be a workshop so come ready to participate and enjoy on Friday October 19.

Diabetes Dialogues

Poor Understanding of Diabetes Medications May Worsen

Glycemic Profile in Type 2 Diabetes

In patients with type 2 diabetes, a lack of knowledge regarding diabetes drugs is associated with higher HbA1c level and worse blood glucose profile, according to findings from a cross-sectional study published in the Journal of Diabetes Investigation.

Ryosuke Sakai, MD, of the department of endocrinology and metabolism at Kyoto Prefectural University of Medicine, Graduate School of Medical Science in Japan, and colleagues wrote in the study background, "Thus, to achieve good blood glucose level,

many patients with type 2 diabetes receive medication therapy. Regardless of these various approaches, many of them cannot achieve good blood glucose levels. One of the reasons many of them cannot achieve good blood glucose level is poor medication adherence." A problem we have all encountered in our treatment efforts.

Researchers analyzed data from 479 outpatients with type 2 diabetes (305 men; mean age, 68 years; mean diabetes duration, 12 years; mean HbA1c, 7.2%) seen at the Kyoto Prefectural University of Medicine, between January 2014 and January 2016.

Participants completed a questionnaire regarding lifestyle factors and use of diabetes medications. Researchers assessed medical records regarding current treatments, including medications for diabetes and total number of oral medications. Participants were considered to have poor understanding of diabetes medications if answers to the question "Do you take diabetes medications?" contradicted the prescriptions on the questionnaire.

Researchers evaluated the correlation between poor understanding of diabetes medications and the rates of microvascular complications, smoking status, alcohol consumption, exercise, nephropathy, neuropathy, oral diabetes medications and insulin, using propensity-score matching analysis to eliminate confounders.

Within the cohort, 425 patients (89%) used diabetes medications, with a mean of 5.4 overall diabetes medications and mean 1.7 oral diabetes medications.

Researchers identified 40 patients (8.4%) as having a poor understanding of diabetes medications.

Patients defined as having a poor understanding of diabetes medications had a higher HbA1c vs. those determined to be knowledgeable about their medications (mean, 7.5% vs. 7.2%; $P = .041$). Patients with poor understanding also had fewer prescriptions for diabetes medications vs. patients with

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Interview With Robert L. DiGiovanni, DO, FACOI



Meet **Rob DiGiovanni, DO, FACOI**, a rheumatologist who has practiced 31 years with Suncoast Internal Medicine Consultants in Largo, Florida. A graduate of Kirksville College of Osteopathic Medicine, now A.T. Still University, Rob has been on the ACOI Board of Directors since 2013. He is involved with the ACOI in many ways, including currently serving as Program Chair, 2018 ACOI Annual Convention; Chair, Development Committee; Chair, Government Affairs Committee, and a member of the Nominations and CME Committees.

Ms. Ciconte: Tell me why you have dedicated

your time and talents to ACOI.

Dr. DiGiovanni: I belong to a number of national medical associations, including the ACOI, AOA, American College of Rheumatology, as well as state organizations like the Florida Osteopathic Medical Association and Florida Rheumatology Society. However, I dedicate a more significant amount of time to the ACOI because I identify most closely to the College. The ACOI best represents my practice and benefits my patients. My professional and personal goals align most closely with the ACOI.

Ms. Ciconte: You have been on the ACOI Board of Directors for a number of years. This year you serve as the Chair of the College's Development Committee. Why did you agree to take on this leadership role? What is the role of the Development Committee?

Dr. DiGiovanni: I took on the role of Development Committee Chair this year because I believe, as we transition from a GME to CME organization, it is very important that the ACOI become stronger for the next generation of internists. Young internists should understand the need for funding the College's mission and values, which benefit all our members' practices and, most importantly, their patients. I see the Development Committee helping to get those messages out to long-time and new ACOI members.

Ms. Ciconte: In addition to sharing your time and talents with ACOI, you have made financial contributions to ACOI over and above your dues, including a generous contribution to the 75th Anniversary Campaign. Why did you choose to make a gift? What do you think ACOI should do and say to encour-

age members to support the College financially?

Dr. DiGiovanni: I chose to make a gift to the 75th Anniversary Campaign because of my deep belief and involvement in ACOI. As I mentioned earlier, my goals and ACOI's goals are aligned.

As for how to encourage members to support the College financially, I would say that the College is the best steward of the funds we contribute. We all contribute to other institutions and organizations, but there is no doubt in my mind that ACOI uses our contributions to fund current and future initiatives that will benefit our family of osteopathic internists.

Ms. Ciconte: Given the challenges facing osteopathic internal medicine, what does ACOI need to do to continue to serve its members in the future?

Dr. DiGiovanni: Looking to the College's future, the ACOI needs to continue to have a strong, active and contributing membership.

These contributions can be financial, but also must be contributions of members' time and talents. We have born teachers and healers among our membership. Their talents and abilities need to be shared with our members and the next generation of internists.

Ms. Ciconte: Dr. DiGiovanni, do you have any closing comment or thought?

Dr. DiGiovanni: Like many others who are devoted to the ACOI, I enjoy serving the College and its members. I am happy to hold up the ACOI banner for delivering the best medical care to our patients.

Ms. Ciconte: Dr. DiGiovanni, ACOI is indeed grateful to you for your generosity, leadership and dedication to the College and the principles of osteopathic internal medicine.

75th Anniversary Campaign Honor Roll of Donors

(Outright Gifts and Multi-Year Commitments of \$1,000 or more as of August 1, 2018)

The ACOI Board of Directors wishes to thank all ACOI members for their annual support for the College. The generous support of our 75th Anniversary Campaign donors is of the utmost importance as we seek to maintain an osteopathic approach to internal medicine for future generations of patients.

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R. Colin Wetz, DO, FACOI

Mark L. Woodard, DO, FACOI

William Zipperer, Jr., DO, FACOI

Do Well While Doing Good

Gaining Through Giving Seminar at Annual Convention



In our continuing series of tax planning seminars at the ACOI Annual Convention, Sandy Macnab, FAHP, CFRE, President, Alexander Macnab & Co., will present the popular session, Gaining

Through Giving - Doing Well While Doing Good, a Sunrise Session from 7 AM - 8 AM on Friday, October 19 in Crystal Rooms E-F. Sandy is a nationally-recognized planned giving consultant to associations, medical societies, and nonprofit organizations who is working with ACOI.

At the session, you will learn how you can help yourself and your family and help ACOI at the same time. The session will provide an executive overview of the surprising ways that charitable gifts can help you with tax and estate planning issues, even with the new tax law changes.

You will learn about ways to make gifts that can return income for your entire life, or that can help your children or grandchildren. While you will get information on the basics, the session will focus specifically on two plans that give you money back for your lifetime and then go on to help ACOI programs when you are gone.

There are other strategies we can suggest that can increase your current income or reduce your taxes while helping ACOI. If you'd like to know more now, or want to schedule a confidential free telephone consultation with Mr. Macnab, call Brian Donadio at 301-231-8877, or email him at bjd@acoi.org and he will make the arrangements. Ask Brian for a copy of Your 2018 Personal Planning Guide that is packed with ideas for personal and practice income tax planning, investments and retirement, social security and charitable gift planning.

Sign up at the Development Table at the ACOI Annual Convention for a free consultation with Sandy Macnab, FAHP, CFRE on Friday, October 19 and Saturday, October 20.

Do You Have an IRA?

If You Qualify, You Can Reduce Taxable Income AND Help ACOI

If you are at least 70½ years-old and have an IRA, you qualify for a special opportunity. Beginning at that age, the IRS forces you to take an annual Required Minimum Distribution (RMD) that is fully taxed as ordinary income. While some are glad to receive it, others would prefer to keep it out of their taxable income. If that's you, consider asking your IRA plan administrator/custodian to transfer any amount of your RMD (up to \$100,000) to ACOI. The payment must be made by your IRA plan administrator/custodian directly to a qualified charity such as ACOI.

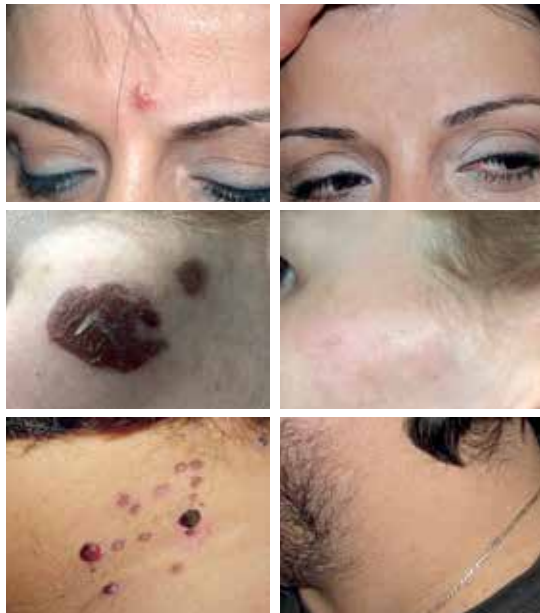
Sometimes called a Qualified Charitable Distribution, what you transfer is not tax deductible as a gift, but it will count against the RMD total you are required by law to receive, AND it will reduce your taxable income dollar-for-dollar. It's win-win. One ACOI member plans to use the opportunity to complete a 75th Anniversary Campaign pledge. Another will use it to step up to a higher recognition level.

Medicine Chair Workgroup to Form

Department Chair Working Group to Form The ACOI is planning to establish a working group for chairs of internal medicine or clinical medicine departments at the osteopathic medical colleges. The purpose of this group is to discuss common problems, issues and innovations in all four years of undergraduate internal medicine education. The group would advise ACOI, COCA and the AOA on standards for pre-clinical and clinical teaching related to internal medicine, physical diagnosis and other associated areas of education. It also would serve as mentors and as a resource for new department chairs.

The group will hold an organizational meeting at this year's ACOI Convention in Orlando. Please contact Mark Baldwin DO, FACOI (mdb51@earthlink.net), or Susan Stacy, FACOI (susan@acoi.org) for further information. If you cannot come to Orlando, please let either of them know of your interest to be included in future activities and meetings.

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Talking Science & Education

continued from page 5

better understanding of their medications (mean, 1.1 vs. 1.7, respectively; $P = .001$). Researchers also observed an association between poor understanding of diabetes medications and undesirable glucose levels (OR = 2.13; 95% CI, 1.02-4.23).

Among the 74 propensity-matched patients according to the presence of a poor understanding of diabetes medications (62 men; mean age, 66 years; mean diabetes duration, 15 years), researchers observed a greater association between poor understanding of medication and blood glucose in logistic regression analysis (OR = 5.45; 95% CI, 1.54-25.8).

This cross-sectional study demonstrates, for the first time, that poor understanding of anti-diabetic medication is associated with poor blood glucose level in patients with type 2 diabetes. In clinical practice of diabetes, we should consider the understanding of antidiabetic medications as a critical part of the clinician-patient dialogue⁴.

¹McMahon GT and Skocelak, SE. Evolution of continuing medical education: Promoting innovation through regulatory alignment. *JAMA*. February 13, 2018; Vol 319 (6).

²Davis DA et al. Changing physician performance: A systematic review of the effect of continuing medical education strategies. *JAMA*. September 6, 1995; Vol 274(9).

³Russell B et al. Strategic approaches to continuing medical education: Applying the transtheoretical model and diffusion of innovation theory. *CE Meas*. 2012;6:27-31. doi:10.1532/CEM08.11109

⁴Sakai R, et al. Understanding of antidiabetic medication is associated with blood glucose in patients with type 2 diabetes: At baseline date of the KAMOGAWA-DM cohort study.

J Diabetes Investig. 2018 Aug 22. doi: 10.1111/jdi.12916. [Epub ahead of print]

Convention

continued from page 1

Highlights of the program include:

- Daily plenary sessions providing the latest updates in all areas of internal medicine.
- A specialist-level cardiology symposium touching on such areas as diabetic heart disease, women and heart disease, surgical vs percutaneous revascularization and cardio-oncology.
- Daily keynote addresses by Daniel Levy, MD, Christian Cable, MD, and Raymond Mis, DO, that are sure to pique your interest.
- AIDS, risk management and other education sessions required by many state licensing boards, including a full-day session offering all of the Florida licensure requirements (one-day registration package available for these sessions).
- An attendance-limited half-day workshop which will explore the role of Osteopathic Principles and Practices in daily patient care.
- Special sessions for medical educators, residents, fellows and medical students.
- An organizational meeting for a new interest group for hospitalists.
- Daily luncheon symposia, sunrise sessions and numerous opportunities to meet and network with colleagues, old and new.

The 2018 Convention and Scientific Sessions will be held at the Orlando World Center Marriott. Registration information is included in this newsletter and is available at www.acoi.org.

Have You Moved?

Keep us updated.

If you have recently made any changes

in your address, phone number or email, please notify the ACOI at acoi@acoi.org



ANNUAL CONVENTION REGISTRATION FORM

Please complete all areas on both sides of registration form. Payment must accompany all registrations. PLEASE PRINT CLEARLY!

Name _____ AOA Number _____

REGISTRATION FEES

REGISTRATION CATEGORY (please check appropriate box(es))	EMERGENCY DEPT 20	AFTER 10/17/20
<input type="checkbox"/> AOCI Member (Training completed PRIOR to 6/30/2013)	\$775	\$825
<input type="checkbox"/> AOCI Young Internist Member (Training completed AFTER 7/1/13)	\$645	\$695
<input type="checkbox"/> AOCI Retired/Emeritus Member	\$645	\$695
<input type="checkbox"/> Non-Member Physician	\$895	\$1845
<input type="checkbox"/> Resident/Fellow (List Training Institution)	\$295	\$445
<input type="checkbox"/> Resident/Fellow Displaying a Poster (List Training Institution)	\$295	\$345
<input type="checkbox"/> Student (List Osteopathic College attended)	MC	MC
<input type="checkbox"/> Non-Physician Health Care Professional (RN, PhD, RD, etc.)	\$775	\$825
<input type="checkbox"/> State Licensure Requirements - Saturday, Oct. 20 7:30 am - 5:30 pm This fee applies ONLY if you do not register for full Convention	\$295	\$345
Spouse/Guest Registration	\$125	\$175

Spouse/Guest registration includes entry to the educational sessions, daily continental breakfast, and all social events, including a ticket to the Opening Reception.

ON-SITE ACTIVITIES (please check appropriate box(es))

<input type="checkbox"/> Wednesday, Oct. 17 - Noon - 1:00 pm Luncheon	MC
<input type="checkbox"/> Wednesday, Oct. 17 - 6:00 pm Welcome Reception	MC
<input type="checkbox"/> Thursday, Oct. 18 - 12:45 pm - 1:15 pm Luncheon	MC
<input type="checkbox"/> Thursday, Oct. 18 - 5:30-7:30 pm Alumni Receptions (Please check the appropriate box below)	MC
<input type="checkbox"/> BERNALTOURSFORD <input type="checkbox"/> COCHRAN <input type="checkbox"/> DUBOUC <input type="checkbox"/> KUBS <input type="checkbox"/> LINDOON <input type="checkbox"/> MCLARENWOODS <input type="checkbox"/> MUDCOM <input type="checkbox"/> POCOMPONGA <input type="checkbox"/> RICHMAN <input type="checkbox"/> WISCOM <input type="checkbox"/> WILKSON	
<input type="checkbox"/> Friday, Oct. 19 - 6:45 am Fan Run	MC
<input type="checkbox"/> Friday, Oct. 19 - Noon - 1:00 pm Luncheon	MC
<input type="checkbox"/> Saturday, Oct. 20 - 1:30 - 5:00 pm Exploring the Role of GPP in Daily Patient Care (Space limited - 25-person maximum)	MC
<input type="checkbox"/> Saturday, Oct. 20 - 7:30 am - 5:30 pm State Licensure Requirements	
<input type="checkbox"/> (Please check if you plan to attend) Separate Registration Required, Space Limited. (NO CHARGE FOR CONVENTION REGISTRANTS)	MC
<input type="checkbox"/> Saturday, Oct. 20 - 12:15 - 1:15 pm Luncheon	MC

OFF-SITE ACTIVITIES

Saturday, Oct. 20 - 1:00 - 5:00 pm - AOCI Golf Outing	\$120
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You will also need to complete the separate registration forms included in this packet.

Club and shoe rentals are separate and paid directly to the Hawks Landing Golf Club.

- PLEASE NOTE: Check here if you plan to stay at the Marriott Orlando World Center. (Separate hotel registration is required. This does not register or guarantee a room at the hotel. Online registration for the hotel is available by visiting <http://about.marriott.com/go/ACOR18>)
- SPECIAL NEEDS: In accordance with the Americans with Disabilities Act, every effort has been made to make this conference and activities accessible to people of all capabilities. Please let specific special assistance needed, or any dietary restrictions, or contact Susan Stacy at susan@aoi.org, 301 231-8877.



OVER...More registration information on reverse side. Both sides must be completed for form to be processed.
You may also register online at www.aoi.org

ACOI CONVENTION REGISTRATION FORM



Full Name			
Preferred Name on Badge		AOA Number	
Mailing Address			
City		State	Zip
Work Ph. ()		Cell Phone ()	
Home Ph. ()		E-Mail Address	
Medical Specialty/Subspecialty			
Preferred Name of Spouse/Guest on Badge			
Emergency Contact			
Relation		Telephone ()	

NOTE: TO COMPLETE THE FORM BELOW, ENTER ALL REGISTRATION FEES FROM OPPOSITE SIDE. SEE REGISTRATION INFORMATION SHEET FOR COMPLETE EXPLANATION OF PROGRAMS AND FEES.

REGISTRATION PAYMENT

REGISTRATION.....\$ _____
 SPOUSE REGISTRATION.....\$ _____
 SATURDAY GOLF OUTING\$ _____

***GAF (Generational Advancement Fund):** ACOI provides each resident and student in attendance with a medical textbook. The College also provides grants to medical students via their campus internal medicine clubs. Suggested Donation:
\$1000 \$500 \$250 \$200 \$150 \$125 \$100 \$50 Other.....\$ _____
**Your donation to GAF may qualify as a tax deductible charitable contribution.
 ACOI is a 501(c)(3) organization and no goods or services are provided in return for the contribution. A separate receipt will be provided for your records.*

TOTAL FEES ENCLOSED.....\$ _____
 Online registration for the Marriott World Center is available by visiting <https://book.passkey.com/go/ACOI2018>

Payment Method	<input type="checkbox"/> Check to ACOI <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> AMX	Credit Card Security #
Credit Card Number	Credit Card Exp. Date	
Name on Card	Signature	
<input type="checkbox"/> CHECK HERE IF BILLING ADDRESS IS SAME AS MAILING ADDRESS LISTED ABOVE. IF NOT, PLEASE PROVIDE BELOW		
Billing Address		
City	State	Zip

REGISTER ONLINE AT WWW.ACOI.ORG or mail to: ACOI Office, 11400 Rockville Pike, #801, Rockville, MD 20852. Phone 301 231-8877, Fax 301 231-6099

NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A processing fee of \$100 will be charged for cancellations received at any time. In order to obtain a refund, written cancellations must be received by September 26, 2018. No refunds will be made after that date, but registration fees may be applied to a future ACOI education activity.

OVER...More registration information on reverse side. Both sides must be completed for form to be processed. You may also register online at www.acoi.org



AMERICAN COLLEGE OF OSTEOPATHIC INTERNISTS
Annual Convention & Scientific Sessions • Oct. 17-21 - Orlando World Center Marriott, Orlando, FL

REGISTRATION INFORMATION

EDUCATION SESSION FEES

Fees for the 2018 education sessions are based on ACOI membership status and length of time in practice. Active members (training completed prior to 6/30/13) pay \$775; Young Internists (training completed 7/01/13 or later) pay \$645; Emeritus and Retired members pay \$645; Residents and Fellows pay \$395 (\$295 for Research Contest entrants). Non-member Physicians pay \$995; Non-Physician Health Care Professionals may register for the ACOI member rate of \$775. There is no charge for students. Spouse/guest registration is \$125. **These fees include a \$50 early registration discount, which applies until September 26, 2018. Registrations received after that date do not qualify for the discount.**

WHAT DOES REGISTRATION INCLUDE?

Physician registration for the Convention includes entry to all education sessions, the Exhibit Hall, daily continental breakfast and luncheon symposia and one ticket to the Opening Reception. Luncheon seating is limited. Spouse/Guest registration includes entry to the education sessions, daily continental breakfast in the Exhibit Hall, and all social events, including one ticket to the Opening Reception. (Due to limited seating, guests may not attend the luncheon symposia.)

HOTEL INFORMATION

The Orlando World Center Marriott is the headquarters hotel for the 2018 ACOI Annual Convention and Scientific Sessions. All educational and social events will take place there. ACOI has arranged a discounted room rate of \$259 per night (single/double). Additional local taxes apply. Early reservations are suggested as the hotel is likely to sell out and does not have to honor ACOI's discounted rates after **September 26, 2018**. Reservation information is available by calling 800 - 228-9290; or visit <https://book.passkey.com/go/ACOI2018>.

PAYMENT INFORMATION

You may register online, by mail or fax for the 2018 ACOI Annual Convention and Scientific Sessions. Secure online registration is available through the ACOI website. Visit www.acoi.org and click on the convention registration link on the home page. You may also use the registration form in the Convention Packet to register by mail or fax. Payment may be by check payable to ACOI or charged on VISA or Mastercard. Complete the required information on the white Registration Form and return it to the ACOI at the address listed on the form.

CANCELLATION POLICY

Please note that refund requests must be made in writing to ACOI prior to **September 26, 2018**. **No refunds will be made after September 26, 2018, but unused registration fees may be applied toward a future ACOI education activity.** A processing fee of \$100 will be charged for cancellations received at any time.

ACOI GENERATIONAL ADVANCEMENT PROGRAM

Donations are requested to assist the ACOI in providing a medical textbook to each resident and student registered for the Convention. Textbook prices average \$125. In addition, the ACOI provides grants to representatives of the internal medicine clubs on the campuses of osteopathic medical schools to defray the cost of attending the Convention. All contributions are acknowledged in the printed program if received prior to the publication deadline. Suggested donation is \$125, but contributions in any amount are welcome. Your donation may qualify as a tax deductible charitable contribution. ACOI is a 501(c)(3) organization and no goods or services are provided in return for the contribution. A separate receipt will be provided for your records.

CME CALENDAR

Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

- 2018 Annual Convention & Scientific Sessions
Oct 17-21 Orlando World Center Marriott, Orlando, FL
- 2019 Internal Medicine Board Review Course
- 2019 Clinical Challenges for Inpatient Care
- 2019 Exploring New Science in Cardiovascular Medicine
- 2019 Congress on Medical Education for Residency Trainers
May 8-12 Baltimore Marriott Waterfront Hotel, Baltimore, MD
- 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.

2018 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination

Computerized Examination 300 Sites Nationwide
September 12-14, 2018 - *Application Deadline: Expired*

Internal Medicine Recertifying Examination

Computerized Examination 300 Sites Nationwide
September 12-14, 2018 - *Application Deadline: Expired*

Internal Medicine Recertifying with a Focus in Hospital-Based Medicine Examination

Computerized Examination 300 Sites Nationwide
September 12-14, 2018 - *Application Deadline: Expired*

Subspecialty Certifying Examinations

Computerized Examination 300 Sites Nationwide
August 28-30, 2018 - *Application Deadline: Expired*

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

Subspecialty Recertifying Examinations

Computerized Examination 300 Sites Nationwide
August 28-30, 2018 - *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 Allergy, Sports Medicine, Pain Medicine, Undersea/Hyperbaric Medicine and Correctional Medicine examinations.

In Memoriam

Word has been received of the death of **David Rothman, DO, MACOI**, 90, of Denver, CO on September 6. Dr. Rothman was a board-certified gastroenterologist who practiced in Denver until his retirement in 2007.

He was a graduate of the Des Moines College of Osteopathic Medicine and Surgery (now Des Moines University College of Osteopathic Medicine), and was an ACOI member for 57 years. Dr. Rothman served on the ACOI Board of Directors and was President of the College in 1983-84. He achieved the degree of ACOI Fellow in 1987. He was inducted into the Gillum Society of Master Fellows in 1995.