

Virginia Orthopaedic Society

Volume No. 6

Summer 2005

President's Message

Dear Colleague,

I am honored to assume the role of president for the 2005 – 2006 term as I see many exciting and challenging opportunities ahead for the VOS. First, I want to take this opportunity to thank our Past President Dr. Eric J. Guidi for his leadership. Eric's dedication and commitment to the VOS over the years has helped the organization immeasurably and we all owe him a debt of gratitude.

Over the past 72 years we have made great strides to formulate a strategic plan that provides a framework that differentiates our mission and function from other organizations. As we move forward, we need to continue to build on this solid foundation.

There are many issues facing medicine and trends in our specialty that all of us are wrestling with. We must continue to embrace the concept of advocacy on behalf of our professional livelihoods and access to care by our patients. The VOS has set up its own ORTHO-PAC, and we are very fortunate to have an outstanding lobbyist Cal Whitehead. Cal is based in Richmond, is very experienced and is truly committed to our organization. There are several potential legislative battles that will require our attention and resources during this coming year. Some of these issues include:

1. Professional Liability Reform.
2. Possible legislation that would limit or prohibit non-radiologists from using, owning, or reading diagnostic imaging equipment.
3. Deregulation of COPN requirements for extremity MRI equipment.
4. The American Physical Therapy Association (APTA) has made it a major goal to change state laws, secure Attorney General opinions, and use regulations to prohibit or restrict physician ownership of physical therapy practices.
5. Fair Business Practices for insurance companies.

All members of our Board have contributed to the ORTHO-PAC. I encourage each of you to contribute generously to the ORTHO-PAC. We must stay true to our traditions and core values. Embracing and promoting professionalism, working towards unifying the Virginia orthopaedic community, and leveraging our individual roles in our own communities will lead to future success, both individually and to that of the VOS.

The **59th VOS Annual Meeting** to be held May 19 – 21, 2006 in Norfolk, Virginia will be outstanding, thanks to the tireless efforts of John Mann, who has scripted an excellent balance of top scientific papers and symposia. I encourage you to mark down the dates.

Inside this issue, you will find a brief survey (page 7) that we at the VOS are asking you to complete. It will help us explore the attitudes and actions of our membership regarding patient access to emergency orthopaedic care. Please take a few minutes to complete the survey. Results of the survey will be incorporated in the program of the 59th VOS Annual Meeting in Norfolk. The results may also be shared with the AAOS leadership as they are also working to address some of these same issues.

Thank you for your support, and I welcome any input and helpful critiques.

Joseph T. Moskal, MD
VOS President



Joseph T. Moskal, MD

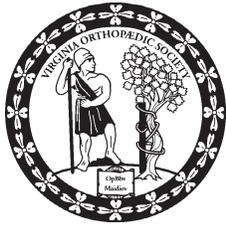
VOS Advocacy: Addressing Issues and Raising Visibility

As mentioned in Dr. Moskal's President's message, VOS leadership has made a commitment to build and expand its legislative and regulatory advocacy efforts. Organizations that have been successful in shaping public policy have adopted the activities critical to advancing goals and turning back imprudent initiatives. Establishing strong relationships with legislators through political support (contributions and endorsements) and grassroots activity (year round communication and education) is the simple, proven prescription for success.

There are several major issues facing orthopaedists in the next few months. VOS leaders have developed plans to address them and your participation is critical for positive outcomes. Tort reform, managed care reform, restrictions on use of diagnostic imaging equipment, prohibitions on physical therapy services, and unknown scope of practice battles will be considered by General Assembly members. As experts in your field and constituents to Delegates and Senators, it is incumbent on you to communicate your willingness to serve as a resource on medical issues. Build the relationship now by sending a brief note or attending a fundraiser. When the time comes to ask a legislator to take a position on an issue, they will know who is providing the information.

One of your most powerful new tools is ORTHO-PAC. Through generous giving, orthopaedists and concerned friends helped to shatter our first year fundraising goal. As we closed ORTHO-PAC's "fiscal year" at the annual meeting in Hot Springs, we raised nearly \$15,000. This money is used to support General Assembly and statewide candidates who share our commitment to a better medical care system. ORTHO-PAC raises awareness about our goals and the visibility of your profession. Please make a contribution in 2005-06 by using the enclosed form.

Continued on page 2



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VOS Board of Councilors Report

As Virginia councilors, we are pleased to report that the Board of Councilors has substantial input and influence with the AAOS leadership. President Stuart Weinstein, President-elect Kyle and Second Vice President Beatty were in attendance and easily accessible at the National Orthopaedic Leadership Conference (NOLC). It might be noted that The Board of Councilors meets three times per year, (e.g. at the AAOS annual meeting, NOLC in Washington in May and a national rotating meeting in October). The 2005 rotating meeting will be held in Williamsburg.

At the recent NOLC Washington meeting your councilors introduced a resolution to expand the AAOS tort reform initiative to include consideration of health courts, mediation, arbitration, no fault system, and high deductible medical liability insurance products. The resolution was passed unanimously and is included as an addendum to this report. We need to think out of the box on this issue.

On other issues the medical expert witness program is in the final stages of implementation. The bottom line is that AAOS fellows could be expelled from the Academy for unsupported medical testimony in court cases. The ramification being that such expulsion would result in the AAOS reporting to the state licensure Boards and the National Data Bank.

Major topics also included the ABOS implementation of the re-certification processes which will include professional standing and patient satisfaction surveys as well as the more standard cognitive testing and CME credits.

The radiology initiative to control all imaging studies was a source of animated discussion and will be opposed vigorously. Similar opposition is forthcoming concerning the physical

therapy association through state licensure boards threatening the license of physical therapists who are employed by physicians.

The AAOS leadership is reviewing strategic planning to include close coordination with orthopaedic specialty societies so as to avoid the AMA conundrum. The AAOS leadership is also very supportive in strengthening state orthopaedic societies. Public service announcements defining the important role of orthopaedic surgeons for societal good will have high priority as well.

House keeping items focused on improved AAOS web site linkage to fellow's practices so take advantage through www.aaos.org.

Finally the National ORTHO-PAC raised almost two million last year and is now a major player on the national scene. Congressman Tom Price, MD (the first orthopaedic surgeon in the congress ever) and Senator Tom Colburn, MD were heavily supported by the PAC and expressed their appreciation in person at the NOLC meeting. Bottom line, if we are to get anywhere on the political front we need to support the national PAC, the Virginia ORTHO-PAC, and the DMLR Tort Reform Initiative. If we don't support these efforts with time and money we will all become de facto employees of either the trial lawyers, the federal government or both.

P. S. - On a personal note Dr. Nirschl has been nominated to be on the nominating committee for the AAOS. Be on the lookout from the academy for the ballot as he would appreciate your vote.

Robert P. Nirschl, MD, MS
Paul Krop, MD

VOS Advocacy

Continued from page 1

Remember, individuals and organizations at odds with your positions ARE talking with your legislators; so should you. Please contact me if you would like to identify your Delegates and Senators, make a contribution to ORTHO-PAC or to a candidate, host an event, or you would like to represent VOS and ORTHO-PAC at a golf tournament or other fundraiser. I can be reached at (804)644-4424 or cwhitehead@whiteheadconsulting.net.

It is a pleasure to serve and represent VOS.

Cal Whitehead



Welcome New Members

Andrew Mark, MD *Virginia Beach*
Jonathan Eric Isaacs, MD *Richmond*
Christoopher K. Kim, MD *Richmond*
John J. McCarthy, MD *Williamsburg*
Lorenzo Silvestri, MD *Richmond*
Robert M. Campolattaro, MD *Hampton*
Alfred A. Durham, MD *Roanoke*
Glen Thomas Feltham, MD *Williamsburg*
William Hamilton, MD *Alexandria*
Chris K. John, MD *Roanoke*
John Prahinski, MD *Lynchburg*

2006 Annual Meeting Norfolk, VA

Our meeting at the Homestead in May was a wonderful learning experience with outstanding talks and fellowship. I would like to invite all of you to attend our annual meeting next May 19 – 21, 2006 at the beautiful Norfolk Waterside Marriott.

Our guest speaker at the welcome dinner on Friday night will be Dr. Terry Whipple from Richmond, VA. To most of us Dr. Whipple needs no introduction. He will give us some of his insights into life and it's transitions.

The scientific session will be highlighted by Dr. Jay Lieberman from UCLA. He will be talk-

ing about the present and potential future uses of orthobiologics in our orthopaedic practices.

The deadline for Abstracts and poster exhibits will be January 16, 2006. We look forward to more excellent papers and posters. Resident scholarship support is available through the VOS.

I look forward to seeing you and your family in Norfolk next May.

John W. Mann, MD

IN MEMORIAM

David V. Strider, MD

On February 14, 2004, Dr. David Valentine Strider died on his 78th birthday at the Martha Jefferson House Infirmery in Charlottesville, after a long fight with cancer.

Born in Charles Town, WV, he was the son of the late Charles Howard Strider and Edith Wall Strider. Surviving immediate family members include his wife of 65 years, Betty Fulk Strider, three children and four grandchildren.

After his rural youth in Charles Town, in 1944 he attended the University of Virginia under the V-12 program via active duty with the US Naval Reserve. He went on to graduate from the UVA Medical School in 1950. He then interned at Sewickley Valley Hospital in Sewickley, PA, from 1950 to 1951 and was a resident in general surgery at Newton D. Baker Veterans Hospital in Martinsburg, WV. In 1952, he was called back into active duty as a medical officer with the Naval Reserve and was initially based in Portsmouth and Norfolk. He was then assigned to the US Marine Corps and after training at Camp Le Jeune, NC served with the Marines in Korea in 1954.

Returning to Charlottesville, he began his residency in orthopaedic surgery at the University of Virginia. In 1957, he opened his private practice in orthopaedic surgery through which he practiced until an initial bout with cancer in 1989. In 1990, he joined Blue Cross/Blue Shield (now Anthem) as an orthopaedic consultant in Richmond, VA and worked there until 1998.

During his years in practice, he held a number of medical and other positions at Martha Jefferson Hospital, including tenure as chief of orthopaedic surgery, chief of surgery, president of the medical staff and member of the Board of Trustees. Over the years, he also devoted substantial energies to Martha Jefferson Hospital's general fundraising efforts and its capital expansion projects. Among a number of medical associations and societies, he was certified by the American Board of Orthopaedic Surgery and as a fellow of the American College of Surgeons. He was also a member and past president of the Virginia Orthopaedic Society. He actively supported the UVA Medical Alumni Association and served on its board and as a class representative of 1950.

Active in other aspects of the Charlottesville medical community, he was a founding member of the Charlottesville Albemarle Rescue Squad in 1960 and served as the team doctor for the Lane High School football team for a number of years.

He was an avid hunter and outdoorsman who bow-hunted annually for deer and turkey in Nebraska. During that time, he had the opportunity to hunt and laugh with many wonderful friends, including the late Fred Bear, the founder of Bear Archery and father of modern bow-hunting. He also greatly enjoyed the outdoors at his family's cabin, Happy Hollow, in Greenwood, VA as well as at his wife's family home, Clay Hill Farm, in Charles Town.

The family appreciates the excellent care of Dr. David Morris, his family physician, the respective staff of University of Virginia Hospital, the Martha Jefferson Hospital and especially to the compassionate and supportive staff at the Martha Jefferson House Infirmery.



VOS 2005 Annual Meeting Supporters

Stryker
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DePuy Orthopaedics
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Roche Laboratories

Synthes USA

Virginia Academy
of Physician Assistants

2005 Virginia Orthopaedic Society Annual Meeting

The Virginia Orthopaedic Society meeting, May 13-15, 2005 was a resounding success and hopefully, enjoyed by all participants. The meeting began with a superb dinner and was highlighted by an entertaining and informative lecture by Dr. Christian Gerber from Zurich, Switzerland. He enlightened us on the differences in the European education system and told the story of his early adventures to the United States to enhance his medical training. His experience included attending Yale University for a medical school rotation and then led to fellowships with Dr. O'Donoghue and Dr. Rockwood. These positive experiences led him to encourage others in Europe to expand their horizons and increase their interaction and intellectual dialogue with surgeons in the U.S. He encouraged us to do the same and expand our interest and study of European contributions to Orthopaedic Surgery.

The academic portion of the meeting was again highlighted by an excellent presentation of Dr. Gerber's experience with the Delta inverse shoulder prosthesis. As those of us dealing

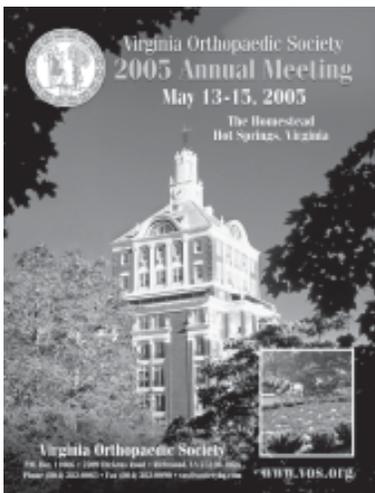


Dr. Christian Gerber

with rotator cuff arthropathy and who are starting to use this prosthesis know, there are many subtle things to learn about this procedure and how to avoid the many complications. We then moved on to two very informative symposia on

articular and meniscal cartilage injury and treatment. Dr. John Xenos, from Colorado, moderated our session on joint arthroplasty and set up the symposia by describing the effects of arthritis and meniscectomy. Dr. Brian Cole from Chicago gave us incredibly informative and detailed discussions of Carticel autologous cartilage implantation and the status on the use of meniscal allografts. These talks were supplemented by our own Drs. David Diduch and Mark Miller from UVA describing their experience with articular cartilage procedures, meniscal repair and emerging technologies in these exciting areas. Combined with outstanding presentations from the community on almost all aspects of Orthopaedic surgery, the meeting provided a first class academic experience. I would like to thank the VOS staff, guest speakers and the participants for contributing to an outstanding program. We look forward to 2006 and another great meeting in Norfolk.

Patrick St. Pierre, MD



Dr. Patrick St. Pierre presents gift to Dr. Brian Cole.



R. Brick Campbell, MD



Dr. Eric Guidi presents Career Award to Dr. Robert Nirschl.



(left to right) Drs. Nirschl, St. Pierre, Gerber and Guidi



Moderator Mark Miller, MD fields a question.



Dr. Zuelzer enjoys a drink with an exhibitor.



Dr. St. Pierre presents gift to Dr. Christian Gerber.



Dr. Kahler & his daughter, Katherine enjoy the reception.



Dr. Dave Diduch (right) visits the exhibits.



Dr. and Mrs. Bob de Blasi



Dr. Guidi thanks Program Chair, Dr. St. Pierre.



Dr. Cap Eschenroeder and family enjoy the Saturday reception.



Dr. Mann (left) chats with a commercial supporter.



Dr. Mark Miller



Dr. Krop (right) chats with an exhibitor.

Thanks to the following physicans and friends who contributed to ORTHO-PAC's inaugural 2004-05 campaign. With their generous support, we raised over \$12,000 to support legislators who share or commitment to a better healthcare system.

**2004-05
ORTHO-PAC
Contributors**

- Robert Adelaar, MD
- Joseph Alhadeff, MD
- Luke Balsamo, MD
- Brick Campbell, MD
- David Diduch, MD
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- Wilford Gibson, MD
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- Chris Young, MD
- Wilhelm Zuelzer, MD



ORTHO-PAC

The Political Voice for Virginia's Orthopaedists



ORTHO-PAC solicits contributions from Virginia orthopaedists to fund General Assembly and statewide office candidates who share our goal to foster a better environment for orthopaedic medical care delivery. Political contributions help offset the expenses of campaigns and allow orthopaedists to target our message to important decision-makers. With your support of ORTHO-PAC we can achieve our mission of educating policymakers about our professional concerns.



YES, I WANT TO HELP MY PROFESSION!

Please accept my contribution of:

___ **\$ 500 (Leadership Circle)**

___ **\$ 250 (Advocate)**

___ **\$ 100 (Member)**

___ **Other \$ _____**

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ORTHO-PAC

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Contributions Are NOT Tax Deductible

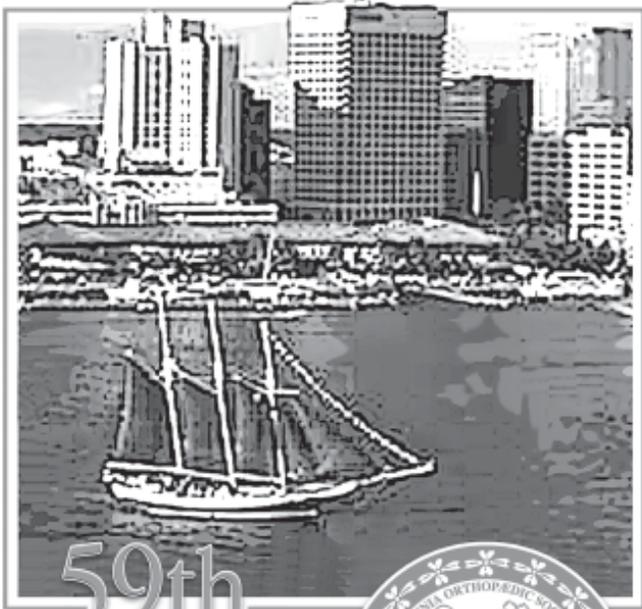
**ADD YOUR NAME TO
THIS IMPORTANT LIST!**

SURVEY

Please return your completed survey via fax (804)282-0090 or mail to: VOS • P.O. Box 11086 • Richmond, VA 23230-1086

1. Please select your age group:
 - 30-39
 - 40-49
 - 50-59
 - >59
2. Please select your sex:
 - Male
 - Female
3. Please select how many years you have been in practice:
 - Less than 10 years
 - 10-20 years
 - 21-30 years
 - Over 30 years
4. Please select the type of practice that fits you best:
 - Full-time academic medical center
 - Part-time academic medical center
 - Private practice with academic affiliation
 - Private practice
5. Please select your sub-specialty:
 - General orthopaedics
 - Trauma
 - Spine
 - Pediatrics
 - Sports
 - Foot & Ankle
 - Total Joint
 - Hand
 - Oncology
 - Other
6. Please check all the leadership positions that apply to you currently:
 - Staff at resident training program
 - Residency Program Director
 - Academic Department/Division Chairman
 - Fellowship Director
 - Past or present AAOS or subspecialty presidential line
 - Past or present AAOS or subspecialty Board member
7. Please select your primary hospital practice:
 - Hospital-based with trauma center
 - Hospital without trauma center
 - Specialty Hospital with ASC
 - Non-surgical
8. How many times per month do you take general ER and/or trauma, hand, spine or Pediatric ER calls?
 - I don't take regular ER calls
 - 1-3 times per month
 - 4-6 times per month
 - 7-9 times per month
 - 10 or more times per month
9. What type of calls do you regularly respond to?
 - General ER
 - Trauma
 - Hand
 - Spine
 - Pediatric
 - N/A
10. Are you specifically compensated for being on call?
 - No
 - Yes, I am compensated by my group
 - Yes, I am compensated by the hospital
11. If yes, how much are you compensated for per weekday?
\$ _____
12. If yes, how much are you compensated per weekend day?
\$ _____
13. If yes, how much are you compensated per holiday?
\$ _____
14. Are you specifically compensated for uninsured patient care and procedures?
 - Yes, I am paid a fixed amount per patient
 - Yes, I am paid a guaranteed minimum per procedure
 - No, I am not being compensated
15. If this guarantee is linked to RVU's please enter the conversion factor: _____
16. The above conversion factor is related to:
 - Total RVUS
 - Work RVUS
 - I don't know
17. Please list any other mechanism of funding/compensation:

18. Do you think that there is a "looming crisis" regarding patient access to emergency orthopaedic care?
 - Yes
 - No
19. Should all orthopaedic surgeons be expected to contribute to ER/call coverage?
 - Yes
 - No
20. Do you believe there should be a limited duration in years?
 - 1-5 years
 - 6-10 years
 - 11-15 years
 - 16-20 years
 - No, there should be no limit on duration
21. Do you think there is an upper age limit?
 - Yes, limit of 40 years of age
 - Yes, limit of 50 years of age
 - Yes, limit of 60 years of age
 - No, there should be no age limit
22. Should call have specific compensation?
 - Yes
 - No
23. Should hospitals subsidize uncompensated professional work?
 - Yes
 - No
24. Should American Medicine explore alternative strategies to insure that emergency care is available, i.e. allow other medical specialties (general surgeons) to provide orthopaedic care?
 - Yes
 - No



**59th
Annual
Meeting**

May 19-21, 2006

The Norfolk Waterside Marriott • Norfolk, VA



Save the Date!



**VOS 2006
Annual Meeting**

May 19-21, 2006

The Norfolk Waterside Marriott
Norfolk, VA

2005 Annual Meeting
Photos are at www.vos.org

Virginia Orthopaedic Society
2209 Dickens Road
P.O. Box 11086
Richmond, VA 23230-1086

