Macomb Journal of the Macomb County Medical Society

Medicus

January/

February

2014

Issue

Vol. 22 No. 1



L-R: Dr. Scot Goldberg, MSMS President Dr. Kenneth Elmassian, MCMS President Dr. Adrian Christie, Sen. Tory Rocca, Rep. Sarah Roberts, Rep. Henry Yanez, and Dr. Paul Sweda.

PRSRT STD US POSTAGE PAID LANSING, MI LANSING, MI



Macomb County Medical Society



Journal of the Macomb County Medical Society 810-387-0364 Toll Free 877-264-6592 Fax 810-387-0372 e-mail mcms@msms.orq web www.macombcms.org

Editor

Adrian J. Christie, MD

Managing Editor Heidi L. Leach

2014 MCMS **OFFICERS AND DELEGATES**

President

Adrian J. Christie, MD

President Elect

Gary L. Shapira, MD

Secretary

Lawrence F. Handler, MD

Treasurer

Ronald B. Levin, MD

MSMS 15th District Director

Scot F. Goldberg, MD

Delegates

Adrian J. Christie, MD Gary L. Shapira, MD Alan C. Parent, MD Donald B. Muenk, MD Marilynn Sultana, MD Lawrence F. Handler, MD Ronald B. Levin, MD Paul D. Sweda, MD Timothy S. Kim, MD

Alternate Delegates

Narendra D. Gohel, MD Pyara S. Chauhan, MD

Executive Director

Heidi L. Leach

THIS ISSUE

anuarv/	February,	201	4
---------	-----------	-----	---

President's Page	3
MSMS Update	4
Member News	7
Hospital News	9
Announcements	13
Meet Your 2014 MCMS Officers & Delegates	15
Membership Report	

Reportable Diseases Update......19

Macomb Medicus is published bimonthly: Sept./Oct., Nov./Dec., Jan./Feb., March/April, and May/June by the Macomb County Medical Society. Subscription to Macomb Medicus is included in the annual society membership dues. Adrian Christie, MD, takes photographs unless otherwise indicated.

Statements and opinions expressed in articles published in Macomb Medicus are those of the authors and not necessarily those of the Macomb County Medical Society. Advertisements do not represent approval or recommendation of the Macomb County Medical Society.

Address changes and all communications relative to articles and advertising in Macomb Medicus should be addressed to: Editor, Macomb County Medical Society, P.O. Box 62 Yale, Michigan 48097-0062.

All material for publication, including advertisements, must reach the Society office no later than the 5th (business) day of the month preceding the date of issue, e.g. December 5 for the January/February issue. Thank you. No portion of the Macomb Medicus may be used for publication elsewhere without permission from the publisher.



Is "Obamacare" Designed to Fail?



By: Adrian J. Christie, MD

WE ARE LIVING IN A UNIQUE POLITICAL ENVIRONMENT, where a massive entitlement program misnamed The Affordable Care Act (ACA), affecting one sixth of the US economy, was forced through the Congress on Christmas Eve 4 years ago, a 2700 page bill read by few and without a single Republican vote. Despite the incongruity of the federal

government mandating that everyone buy health insurance- why not Ford cars or home mortgages- this mandate was upheld as legal by the Supreme Court on account of the chief justice Roberts giving a convoluted explanation where he claimed that the penalty for not purchasing the insurance was a tax, like income tax, permitted at the Federal level. This Act is now the law of the land and can only be reversed by a change in government leadership including a new president. What disturbs me perhaps more than anything are the exceptions being made by the president and his executive branch for members of Congress and their staff, and unions in the government's favor, not mentioning the arbitrary delays in implementation which appear to be designed to mitigate the political electoral consequences of the changes brought about by the Act. If the ACA is now enshrined into law, then surely it must be unconstitutional to make significant changes without involvement of the same legislative body, namely Congress, that passed this law in the first place.

No comparable massive entitlement program has ever been successfully attempted by one political party without bipartisan support; even bipartisanship may be insufficient, as witness the collapse of a catastrophic health care plan for seniors in the late 1980's proposed by the Reagan administration with support from Democrats. Medicare was passed in 1965 during the Johnson administration with bipartisan support and remains a popular program with the elderly, but its funds are being raided by "Obamacare" and it may become unsustainable if changes are not made. One thing is very clear. As people at the lower end of

No comparable massive entitlement program has ever been successfully attempted by one political party without bipartisan support.

the socioeconomic scale lose their previous health insurance on account of government mandates, and that includes the young and healthy that may have so-called "catastrophic policies" with low cost premiums, there is massive enrollment in Medicaid which reimburses doctors at a pathetically low rate. The cost in office time and labor of collecting payments from these government programs may exceed the payments - and many doctors justifiably refuse to take more patients on these plans as even the most altruistic of physicians has to pay his staff and office bills.

Some speculate that "Obamacare" is designed to fail, as one commentator puts it, like "a controlled explosion", so that the majority of Americans would welcome a single payer, government-run health care system. Improbable as this may seem, President Obama, Senate leader Harry Reid and former House Speaker Nancy Pelosi are all on record as favoring a single payer system. Even were this so, the public anger ensuing from millions of people losing health insurance which they were satisfied with - and past polls have shown that more than 80 percent of insured fell into this category - would make it unlikely that Americans would trust government to fix the problem that it created.

Like so many government plans, witness the frequent failures of 5 year plans of communist governments leading to massive starvation or insolvency, they don't take human nature and individual preferences into account.

Ref: What to Do When ObamaCare Unravels, Health insurance should be individual, portable across jobs, states and providers, and lifelong and renewable. By John H. Cochrane, Wall St Journal, December 25, 2013, http://online.wsj.com/news/articles/SB10001424052702304866904579265 932490593594?mod=djemEditorialPage h

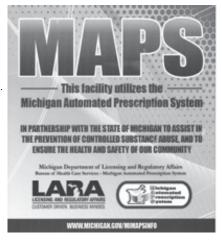


HANG MAPS POSTER TO DETER 'DOCTOR SHOPPERS'

The Michigan Automated
Prescription System (MAPS)
has produced a small poster for
physicians to hang in their practices
to act as a deterrent to drug-seeking
patients, also known as "doctor
shoppers."

By: Scot F. Goldberg, MD; Adrian J. Christie, MD; Betty S. Chu, MD; Michael A. Genord, MD; Donald R. Peven, MD; David P. Wood, Jr., MD

To request copies, contact Andrew Schepers at MSMS at 517-336-7579 or aschepers@msms.org.



MEDICAID HEALTH PLANS RECEIVING PRIMARY CARE PAYMENT INCREASES

Medicaid health plans received their initial payment for the primary care increase. There's currently no timeline by which the health plans will release this money to the physicians. However, it will be retroactive to January 1, 2013. There might be a few health plans sending the payments through the PO/PHO. But 100% of the money is to be paid to the physician, so the PO/PHO will not be keeping any portion of that money.

If you have questions about the payment timeline or whether the money will be paid through a PO/PHO, please contact the health plan directly.

For more information, contact MSMS Reimbursement Advocate Stacie Saylor, CPC, CPB, at 517-336-5722 or ssaylor@msms.org.

MEDICAID EXPANSION GETS OK FROM FED GOVT

The US Centers for Medicare & Medicaid Services approved Michigan's Medicaid eligibility expansion plan (a.k.a., the

Healthy Michigan Plan). The approval means the state can now enroll into Medicaid people with incomes of up to 133% of the federal poverty level on April 1.

According to the Michigan Department of Community Health, all aspects of the state proposal—provisions for health savings accounts, monitoring of premiums, etc.—were approved by the federal government. MDCH estimates that about 322,000 uninsured Michiganders will enroll in 2014.

MSMS is working with the Snyder administration to ensure that the Healthy Michigan Plan works for patients and for physicians.

BCBSM LISTENS TO MSMS - EXTENDS SE MICHIGAN EPO NETWORK DEADLINE

MSMS has succeeded in advocating for additional time for physicians to review the contract provided by BCBSM for a Southeast Michigan Local Exclusive Provider Organization (EPO) Network. MSMS received word that Blue Cross Blue Shield of Michigan (BCBSM) will extend the physician contracting period for the EPO through January 31, 2014. BCBSM also provided answers to MSMS's questions seeking clarification about the contractual addendum (Addendum A - Local Network Provider Agreement).

This extension provides additional time and opportunities for physicians' questions to be addressed. BCBSM intends to perform additional outreach to physicians through their Physician Organizations and individually over the next several weeks. Additionally, BCBSM is planning to host an informational call for the Southeast Michigan physician community on January 14, 2014, in order to enable a number of the frequently asked questions to be broadly answered. Watch for future communications from MSMS and BCBSM for scheduling and logistical details.

In addition to BCBSM's response to MSMS's questions, physicians may want to visit www.msms.org to review a summary review and points of consideration document related to the EPO contract prepared by MSMS Legal Counsel, as well as a one-page summary from BCBSM.

As with any contract, it is important that you read and fully understand the contract before making a decision. Physicians and/or their medical practices are reminded to make their own unilateral, independent decisions to participate, or not participate, in BCBSM's EPO Network and to seek the advice of their own legal counsel. Questions may be directed to Stacey Hettiger at 517-336-5766 or shettiger@msms.org.



The federal government recently announced it will push the anti-kickback safe harbor that allows hospitals to provide physician practices with electronic health-record systems and training to operate them to 2021. Originally, the rule was set to expire December 31, 2013, but was changed under new rules from the HHS inspector general office and the US Centers for Medicare & Medicaid Services (CMS).

The extension is five years longer than HHS proposed in April. The final rules also specifically exclude laboratory companies from the "scope of protected donors," update provisions on interoperability, remove electronic-prescribing requirements and make clear that EHR donors cannot put limits on the use, compatibility and interoperability of their donated items or services.

MEDICARE RULES FOR REPORTING DIAGNOSIS CODES

Providers often ask, what diagnoses do we report on a claim - everything the patient has or has had - or just the reason for the encounter?

Report the code that is chiefly responsible for the patient encounter. When other chronic or documented conditions coexist at the time of treatment and affect patient care, include these diagnoses codes too. Do not code suspected diagnoses and always assign codes to the highest level of specificity.

To learn more about rules for reporting diagnosis codes on the claim, refer to CMS Internet-Only Manual (IOM), Publication 100-04.

MSMS STUDENT CHAIR SUPPORTS LOAN REPAYMENT BILLS

In December, the Chair of the MSMS Medical Student Section submitted a memo read during a hearing of the Michigan Senate Appropriations Committee in support of Senate Bill 648, sponsored by Sen. John Moolenaar (R-Midland), and SB 649, sponsored by Sen. Jim Marleau (R-Lake Orion), which would give aspiring family physicians more flexibility in paying back school loans received through the Michigan Essential Health Provider program. The bills also would increase the maximum amount a physician could put toward a loan at \$40,000, removing the four-year limit on loan repayments and including dentists in the loan repayment program.

Nicolas K. Fletcher, Michigan State University College of Human Medicine, noted that currently, only one in five medical students comes from one of these underserved areas. "Undergraduate students from these areas cite the increasing cost of attendance as a major obstacle in choosing to pursue a career in medicine," he wrote.

Fletcher also pointed out a hard reality in the memo. "Growing debt burden is pushing medical graduates away from high-need, low-pay primary care specialties in underserved areas," he wrote. "Solutions like Senate Bill 648 provide direct incentive for medical students to pursue the field of primary care medicine, particularly in areas that are underserved."

Physicians representing the Michigan Academy of Family Physicians testified at the hearing. No vote was taken on the bills.

THINK HIPAA VIOLATIONS AREN'T REAL? THINK AGAIN...

A dermatology practice in Massachusetts recently learned this lesson the hard way. Adult & Pediatric Dermatology, P.C., has agreed to settle potential violations of the HIPAA Privacy, Security & Breach Notification Rules with the Department of Health & Human Services, agreeing to a \$150,000 payment. The practice will also be required to implement a corrective action plan to correct deficiencies in its HIPAA compliance program. This case marks the first settlement with a covered entity for not having policies and procedures in place to address the breach notification provisions of the 2009 HITECH Act.

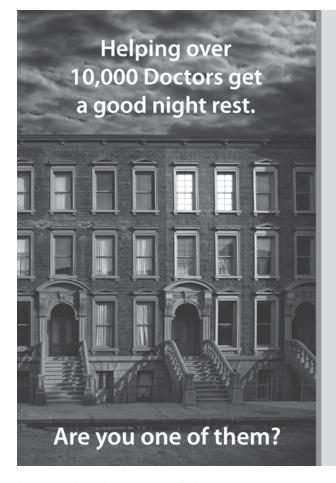
If cases like this show anything, they point out that physicians, now more than ever, need to be aware of revisions to the HIPAA privacy, security, enforcement, and breach notification rules that took effect in 2013. Get started with these MSMS resources: members-only guidance document; newly-updated MSMS HIPAA Guide; free legal consultations for general questions; and DocBookMD, a HIPAA-compliant, physician-designed mobile application.

For more information about HIPAA resources from MSMS, contact Stacey Hettiger at 517-336-5766 or shettiger@msms.org.

2013 MCMS Holiday Sharing Card Project a Great Success

Thank you to MCMS Members Who Donated \$5,655

We would like to thank the MCMS members who participated in the 2013 MCMS Foundation Holiday Sharing Card Project. Due to your generosity we were able to raise \$2,870 For the Macomb County Food Program and \$2,785 For Turning Point Shelter.



Why has SCW Agency Group become synonymous with professional liability coverage? Maybe it's because for more than 30 years, SCW Agency Group has provided physicians across America with outstanding professional liability coverage and unparalleled customer service. Using our extensive knowledge of liability issues and our relationships with the best insurance underwriters, we have the flexibility to provide you with a coverage plan that is right for you and the ability to back you up when you need it most.

We work with insurance companies that are rated among the highest with A.M. Best and Standard & Poor's, so you receive the best insurance products for your money.

So go ahead. Call SCW Agency Group. You can be rest assured knowing we're on your side.

O Experience

O Knowledge

O Service



for a free quote call 800.968.4929 or visit www.scwinc.com





Get Involved with Your Medical Society!

We need Members to Participate on MCMS Committees

WE WANT VOLUNTEERS WILLING TO ATTEND AND ACTIVELY PARTICIPATE ON COMMITTEES. If you are interested in being on one of the following committees please email Heidi Leach at the MCMS office at mcms@msms.org or call 810-387-0364.

MACOMB COUNTY MEDICAL SOCIETY STANDING COMMITTEES:

BYLAWS – meets as needed to consider amendments to the MCMS Bylaws.

ETHICS & MEDIATION – meets as needed concerning the maintenance of standards of conduct and discipline of members as well as to review patient complaints.

LEGISLATIVE & SOCIAL ECONOMICS – meets quarterly with local and state legislators on Fridays at 7:30 am at the Loon River Café in Sterling Heights.

MEMBERSHIP – meets as needed to promote recruitment of non-members and to ensure retention of current members.

PROGRAM – meets as needed to plan and organize the regular meetings, special events, and fund raisers for the Society and the Foundation.

PUBLIC RELATIONS – meets as needed with community organizers and businesses to accurately convey medicine's message to the public sector.

>

SHARE YOUR NEWSWORTHY ITEMS

SOUTH MACOMB INTERNISTS. PC

NEIL ALPERIN, MD, DDS
Rheumatology

ANTHONY BARON, MD
Rheumatology

SCOT F. GOLDBERG, MD Internal Medicine BARUCH KATZ, MD Internal Medicine

MICHAEL ROTTMAN, MD
Internal Medicine

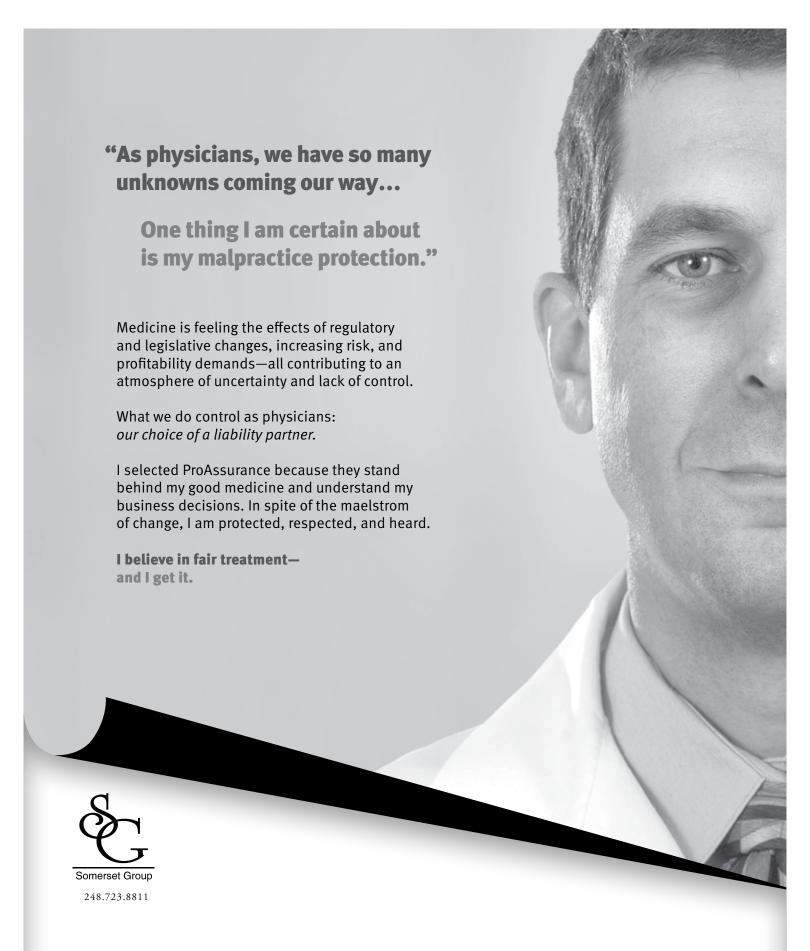
ALLEN N. STAWIS, MD Hematology – Oncology

KENNETH TUCKER, MD, FACP Hematology – Oncology

11900 E. 12 Mile, Suite 300, Warren, MI 48093 Phone (586) 751-7515 • Fax (586) 751-1302 Prescription Refill (586) 751-2025 Billing (586) 751-3860 Have you or a MCMS colleague been elected to a position (specialty society, hospital, community based program, etc.) or honored for your volunteer service within the community or abroad? Let us know. We would like to recognize MCMS members in the 'Member News' section of the Medicus.

Contact Heidi Leach at mcms@msms.org or macombcms@gmail.com with newsworthy information.

Publication is subject to availability of space and the discretion of the Editor.





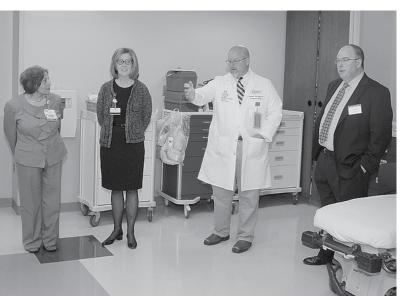




St. John Macomb

DEDICATION CEREMONY HELD FOR NEWLY EXPANDED MACOMB CENTER ER

A dedication ceremony was held on Oct. 15 to celebrate the newly expanded ambulatory area of the St. John Macomb-Oakland Hospital (SJMOH), Macomb Center ER. The new ambulatory area includes 11 additional treatment spaces and will enable the medical staff to triage and treat an additional 40 patients each day. "Since Henry Ford Bi-County Hospital closed in 2012, the ER volume at Macomb Center has increased 33 percent," explained Terry Hamilton, SJMOH president. "The expanded ambulatory area will help us better serve the community by providing greater efficiency and patient privacy while streamlining and expediting patient care." The project was primarily funded through a generous \$1 million donation from a Warren resident and is one of the largest single donations the hospital has ever received. The St. John Macomb-Oakland Hospital Auxiliary also contributed to the expanded ER.



Antonio Bonfiglio, MD, medical director of the St. John Macomb-Oakland Hospital Emergency department, takes a few colleagues and community members on a tour of the new ambulatory area of the Macomb Center ER.

SJMOH UROLOGIST RECOGNIZED BY AMERICAN OSTEOPATHIC ASSOCIATION

The American Osteopathic Association inducted St. John Macomb-Oakland Hospital (SJMOH) urologist Ronald W. Wadle, DO, into the 2013 class of Great Pioneers in Osteopathic Medicine. The Great Pioneers consist of osteopathic physicians and other members of the osteopathic medical profession who have made significant contributions to osteopathic medicine. They are nominated by their peers and must have been involved in the osteopathic medical profession for at least 25 years, and helped to advance the profession to what it is today. Dr. Wadle was the past president of the American College of Osteopathic Surgeons, as well as the recipient of the distinguished osteopathic surgeon award.

THREE ST. JOHN PROVIDENCE HOSPITALS EARN AN "A" FOR SAFETY

Congratulations to Providence Hospital, St. John Macomb-Oakland Hospital, Macomb and Oakland Centers, and St. John River District Hospital for each earning an "A" on the fall 2013 update to The Leapfrog Group's Hospital Safety Score report. The Leapfrog Group is an independent, national not-for-profit organization founded more than a decade ago by the nation's leading employers and private healthcare experts. Its mission is to promote safety, quality and affordability of healthcare in the U.S. by promoting transparency and value-based hospital incentives. The Hospital Safety Score assigned a letter grade of an A, B, C, D or F to more than 2,500 U.S. general hospitals based on safety in preventing errors, infections, injuries and medication mix-ups. A leading panel of patient safety experts selected and analyzed 28 measures of publicly available hospital safety data.

SJMOH PROUDLY DISPLAYS GROWING RIBBON OF HOPE

The Radiology Dept. at St. John Macomb Oakland Hospital, Macomb Center was home to a very special display during October - the Ribbon of Hope, a growing tribute to those who have battled breast cancer. The Ribbon and the foundation to support women fighting breast cancer was started in 2006 by Katherine Boyd, MD. The Ribbon of Hope is a series of fabric panels (pink for survivors and purple for those who have lost their battle) that have been individually decorated and then sewn together. In past years the ribbon would accompany Dr. Boyd's team at the Susan G. Komen Race for the Cure in



Detroit, but because of its growing length (more than 400 feet) and fear of its getting damaged, it stays at Macomb Center for the month. The Ribbon of Hope Foundation continually accepts panel submissions. To learn more, go to www.kathboyd.com.



The Ribbon of Hope winds through the waiting room of the Radiology Dept. at SJMOH Macomb Center. "There are more than 1000 names on the Ribbon," said Dr. Boyd. "It's very emotional to look at, because I have treated and know many of these women."

Henry Ford Macomb Obstetrics & Gynecology

16151 19 Mile Rd., Suite 300 Clinton Twp., Michigan 48038

> Phone (586) 228-1760 Fax (586) 228-2672

Steven J. Ferrucci, MD

Ronald B. Levin, MD

Janet C. Weatherly, CNM

ECARE GOES LIVE AT RIVER DISTRICT HOSPITAL

On Nov. 1, St. John River District Hospital launched eCare, the electronic medical record system and a new electronic patient registration system. While River District may be the final SJP hospital to launch eCare, it's the first hospital in the health system to simultaneously go live with new registration and electronic medical record systems. The successful launch of both of these electronic systems was the culmination of months of preparation and work by hospital staff, business support and IT.

GROSSE POINTE SOUTH STUDENTS GET FIRST-HAND LOOK AT EMERGENCY MEDICINE

Thanks to Dr. Margarita Pena, one of St. John Hospital's Emergency Medicine physicians and several of the hospital's ER residents, students from Grosse Pointe South had a chance to try their hands at ultrasound on one of our pregnant associates, suturing (pigs' feet), and intubating a mannequin. They also had time in our Simulation Lab, which is an amazing area of the hospital that can simulate actual medical cases and give feedback to students as they react to cases. Thanks to those that helped, including:

- Attending staff: Drs. Hafez Bazzi, Belinda Kakos, and Jerrold Fisher.
- Residents: Drs. Patrick Frank, Nate Minnick, Matthew Nipe, Daniel Lalonde, Sameer Sinha, Riley Jakob, Rosie Voelker, and Nelson Grant.

CONCUSSION CLINIC OPENS IN MACOMB TOWNSHIP

Each year, more than 300,000 concussions are reported - a fraction of the amount that actually occur. Recent legislation has placed a significant focus on concussions and the importance of ensuring that student athletes are recovered before returning to play. That's why St. John Providence Children's Hospital has opened a Concussion Clinic on the campus of St. John Medical Center - Macomb Township. The clinic sees patients on Mondays who have suffered concussions, mostly from sports but from other injuries as well. It is run by Dr. Michael McMillan, a psychologist, and Section Chief of the Behavioral Disorders Department at St. John Hospital & Medical Center.



A HELICOPTER LANDING BRINGS **EXCITEMENT TO ANY DAY**

In early November, St. John Medical Center - Macomb Township partnered with Survival Flight, Medstar and the Macomb Township Fire Department to complete helicopter landing training. The SJMC - Macomb Township Emergency Department occasionally has emergency patients that require flight, so it was a great opportunity for the team to review its protocols. While updating the protocols, they contacted the Fire Chief to update his protocols too! Since the Fire Department has many new members, he asked if there was a way the team could help with helicopter landing training. U of M was happy to accommodate and bring the helicopter. Jozette Hughes, Clinical Manager, and the Fire Chief coordinated three days of training.

ST. JOHN PROVIDENCE HEALTH SYSTEM CHRISTMAS STORES MAKE CHRISTMAS BRIGHTER FOR HUNDREDS OF FAMILIES IN **NEED**

On Dec. 7, St. John Providence Hospital, St. John Hospital and Medical Center and St. John Macomb-Oakland Hospital were transformed into every child's fantasy. With thousands of toys, books, games and clothes stacked high, this year's annual Christmas Stores provided gifts and fun for nearly 1,500 deserving kids and hundreds of Metro Detroit families. A tradition for more than 30 years and an extension of our

mission, SJPHS invited families, who received care at one our health care centers, and members of our faith community partners to participate. Each family shopped for an outfit and toy for each child, and received a gift card and a bag filled with stocking stuffers. Nearly 200 associates volunteered on the day of the event to help attendees shop, and entertain their children. The Medical Staff also generously contributes to help with the expenses of the effort.

ST. JOHN HOSPITAL'S DONATE LIFE MESSAGE TRAVELS TO THE ROSE BOWL

St. John Hospital President Dave Brooks signed a rose vial with a message of support for organ and tissue donation. The vial was placed on the "Donate Life" float in this year's Rose Bowl parade. The float design is a dedication garden that will be filled with thousands of roses - each with a vial that contains a personal message from hospital CEOs, patients who have received a transplant and organizations who support donation. Do you have a heart on your driver's license? If not, go to www. giftoflifemichigan.org and join the Michigan Organ Donor Registry. Learn more about transplants at www.stjohprovidence. org/transplant





Henry Ford Macomb

CAREGIVER CAFÉ PROVIDES INFORMATION, SUPPORT

Caring for a friend or loved one with a serious illness is often rewarding, but also can be difficult with new questions cropping up at every turn. It also can take an emotional toll.

To assist those in this important role, Henry Ford Macomb Hospitals has introduced the free Caregiver Café. It provides caregivers learning opportunities with Henry Ford Macomb experts and a chance to connect with others in similar situations - all in a relaxed, informal setting. Monthly gettogethers feature information on a specific topic followed by time to share stories or just talk over a cup of coffee or tea.

The meetings take place at Henry Ford Macomb Hospital and will be offered at two different times to accommodate varying schedules. The first session is Nov. 19 and will cover two topics. The schedule includes:

* Nov. 19 from 1 to 3 p.m. or 6 to 8 p.m. - Basic Caregiving and Medication Awareness. Participants are encouraged to bring medications and questions for the pharmacist.

The following dates and topics are offered from 1 to 2 p.m. or 6 to 7 p.m.

- Dec. 17 Holiday celebrations/emotional, spiritual support
- Jan. 21 Nutrition
- Feb. 25 Help with hands-on care and home safety
- March 25 Understanding and managing behavioral changes

"Caregivers are absolutely key in providing patients with chronic illness the best quality of life possible," notes Henry Ford Macomb internal medicine specialist John Bochenek, DO. "I encourage both patients and those helping to care for them to have as much knowledge and support as possible. Resources like the Caregiver Café make connecting them with those resources easier."

The Caregiver Café is free, but registration is required. Call (800) 532-2411.

PROGRAM TEACHING HEALTHY HABITS FOR KIDS WILL KICK OFF IN NEW YEAR

Parents who want some help when it comes to instilling healthy habits in their children - or those who simply want the message reinforced - are encouraged to check out Let's Get Healthy.

The 10-week program is sponsored by Henry Ford Health System. It teaches children ages 9 to 13 how to take simple steps toward understanding the importance of diet and exercise. The activities are fun and engaging while exploring topics including:

- Exercise
- Goal setting
- Mindful eating
- My plate
- Peer influence
- Portion control
- Staying motivated

Various aspects of the program are taught by a pediatrician or family medicine physician, registered dietician, behavioral therapist and athletic trainer in a fun and motivating setting.

Classes will take place on Tuesdays, beginning Jan. 14 from 6 to 8 p.m. at Community Baptist Church in St. Clair Shores. The cost is \$150, but scholarships and payment plans are available.

For more information or to register, call (800) 532-2411 or go to www.HenryFordLivewell.com/letsgethealthy.



FEBRUARY 27-28 MSMS ICD-10 Boot Camp, Somerset Inn in Troy. To register call 517-336-7581 or visit www.msms.org/eo.

MARCH 15 MCMS Family Fun Bowling Event, Sunnybrook Lanes in Sterling Hts., 2-4 pm. To register email the MCMS Office at mcms@msms.org or call 810-387-0364.

MARCH 26 MSMS Physician Sustainability & Payment Reform Part II, Somerset Inn in Troy. To register call 517-336-7581 or visit www.msms.org/eo.

APRIL 25 MSMS Physician Executive Development Program, The Henry in Dearborn, 9 am - 3 pm. To register call 517-336-7581 or visit www.msms.org/eo.

MAY 14-15 Annual Spring Scientific Meeting, The Henry in Dearborn. To register call 517-336-7581 or visit www.msms.org/eo.

MAY 15 MSMS Physician Executive Development Program, The Henry in Dearborn, 9 am - 3 pm. To register call 517-336-7581 or visit www.msms.org/eo.

Watch for emails and fliers with the details of upcoming events.

Do we not have your email address? Send it to us at mcms@msms.org or call 810-387-0364 so that we can keep you informed!

Change of Address? Let us know! Call 810-387-0364 or email us mcms@msms.org any changes.



The Future of Senior Living HAS ARRIVED!



My Doctor's Inn is a pioneer in the next wave of assisted living and memory care communities. Our community is the first Licensed Home for the Aged in the area that is primarily owned by doctors. We have strategies and life plans for each person based on their individual needs.

At My Doctor's Inn, living comes first!

State-Of-The-Art Amenities

Studio, 1 and 2 Bedroom Suites, Three Story Main Street Atrium, Activity Center, Bistro, Library, Hair Salon, and Kid Zone for Visiting Families

For More Information: Call: 586.838.5900

or

Visit: MyDoctorsInn.net

8384 Metropolitan Parkway Sterling Heights, MI 48312





Join Us for Macomb County Medical Society Family Bowling Day

Saturday, March 15th from 2 pm - 4 pm Sunnybrook Golf & Bowl in Sterling Heights (7191 17 Mile Rd. west of Van Dyke)

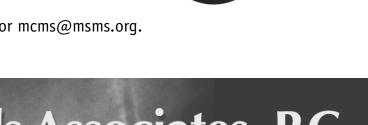
Open to all MCMS Members & Their Family at No Charge

Included will be 2 hours of Bowling (retractable bumpers available for the kids), Shoe Rental, Pizza and Beverages

Space is Limited - Reservations Must be Made by

Friday, March 7th

To Register, email macombcms@gmail.com or mcms@msms.org.



Dr. L. Reynolds Associates, P.C.

Diagnostic Imaging Services

Peter R. Miller, M.D. Director, Imaging Center

Example 2 Imaging Services Emphasizing Bone and Joint Imaging.

Special Procedures Including:
CT and MR Arthrography,
Ultrasonography General and MSK,
DEXA Bone Densitometry,
Mammography, Fluoroscopy
and General Radiography.

28800 RYAN ROAD • SUITE 250 • WARREN, MI 586.751.2704

Meet Your 2014 MCMS Officers & Delegates

MCMS OFFICERS



ADRIAN J. CHRISTIE, MD President & Delegate Warren, Pathologist Ph. 586-573-5026



GARY L. SHAPIRA, MD *President- Elect & Delegate*Warren, Pathologist
Ph. 586-573-5020



RONALD B. LEVIN, MD Treasurer & Delegate Clinton Township, OB/GYN Ph. 586-228-1760



LAWRENCE F. HANDLER, MD Secretary & Delegate Clinton Township, Ophthalmologist Ph. 586-286-3400

MCMS DELEGATES & ALTERNATES -



PYARA S. CHAUHAN, MD *Alternate Delegate*Retired, Warren, Urologist



ALAN C. PARENT, MD

Immediate Past President & Delegate

Warren, Ophthalmologist

Ph. 586-573-4333



NARENDRA D. GOHEL, MD Alternate Delegate Warren, Surgeon Ph. 586-393-7777



MARILYNN SULTANA, MD
Delegate
Warren, Ophthalmologist
Ph. 586-573-4333



TIMOTHY S. KIM, MD *Delegate*Shelby Township, OB/GYN
Ph. 586-254-3545



PAUL D. SWEDA, MD

Delegate

Retired, Clinton Township, OB/GYN



DONALD B. MUENK, MD Delegate Warren, Ophthalmologist Ph. 586-573-4333



SCOT F. GOLDBERG, MD MSMS 15th District Director Warren, Internist Ph. 586-751-7515

Michigan Department of Community Health Announces

ICD-10 SCENARIO TESTING

For ALL Michigan Medicaid Providers

Implementation

MDCH has created a survey-based tool that allows providers to review common medical scenarios and assign the ICD-10 diagnosis codes that they feel are appropriate. The survey is applicable to both

medical professionals, such as physicians, nurse practitioners,

and physician assistants, as well as coding and billing professionals.

Providers are encouraged to respond to all specialties that apply to their practice. Scenarios are available for the following specialties:

Cardiology

Endocrinology

Family Medicine

Gastroenterology & Hepatology

Infectious Diseases

Internal Medicine (General)

Neurology

Obstetrics & Gynecology

Orthopedics

Pediatrics and

Pulmonology

Survey respondents will receive a summary report, which compares the respondent's code choice(s) with others who took the survey, within 1-2 business days. MDCH will

not provide "correct" answers. The summary report will be sent to the e-mail address

provided at the beginning of the survey.

Both the survey link and instructions have been posted at

www.michigan.gov/5010ICD10/ >> ICD-10 Information >> Testing.

The survey can be accessed directly at https://www.surveymonkey.com/s/ MI Medicaid.

Should you have any questions, please feel free to contact our ICD-10 testing support team at MDCH-B2B-Testing@Michigan.gov.

We look forward to testing with you!





Reinstated Members

ANDREW OGAWA, MD

Ophthalmology - Board Certified

Hospital Affiliation: St. John Macomb. Currently practicing at Millman-Derr Center for Eye Care, 30051 Schoenherr Rd., Warren, MI 48088, ph. 586-558-8800, fx. 586-558-4771.

VIJI V. THOMAS, MD

Pain Management - Board Certified and Anesthesiology – Board Certified

Hospital Affiliation: Crittenton. Currently practicing at Gilead Pain Care, PLLC, 39651 Garfield Rd., Clinton Twp., MI 48038, ph. 586-846-2850, fx. 586-846-2859.

Retired Status

EDWARD S. LERCHIN, MD Dermatology, Retired 12-31-13

ROBERT K. MOORE, MD

Cardiology, Retired 12-31-13

Support Our Advertisers!!

Need insurance, looking to refer a patient?

Look to the physicians and companies who advertise in the Medicus.

DONALD B. MUENK, M.D., F.A.C.S.

MARILYNN SULTANA, M.D., F.A.C.S.

ALAN C. PARENT, M.D., F.A.C.S.

SARAH B. MUENK-GOLD, M.D.

ADREA R. BENKOFF, M.D.

Cataract & Eye Consultants
Of Michigan

Donald B. Muenk, M.D., F.A.C.S. - Director

29753 Hoover Road, Suite A Warren, Michigan 48093

(586) 573-4333 Phone (586) 573-2149 Fax



133 S. Main Street • Mt. Clemens, MI 48043 586-465-1600 • Fax 586-465-0329

30795 23 Mile Rd., Ste. 201 • Chesterfield, MI 48047 586-421-1600 • Fax 586-421-1800

A full service Internal Medicine and Cardiology practice, providing patient care in Macomb County for over 50 years.

Designated Patient Centered Medical Home

Internal Medicine

Ruth A. Rydstedt, MD Jerome H. Finkel, MD Pasquale B. laderosa, MD Kenneth E. Smith, MD Robert A. Chang, MD Sima Salman, DO Bonnie Ogden, PA-C Amy Lorkowski, PA-C Adrienne Doerr, PA-C

Cardiology

Joseph B. Naoum, MD Gunateet Goswami, MD Natesh Lingam, MD Lauren Groves, PA-C Whitney Wright, PA-C

Complete Imaging & Ancillary Service Center

High Complexity Complete CLIA Laboratory • CT Scan

- Nuclear Cardiology Imaging Echo Doppler
- Cardiovascular Doppler Ultrasound Stress Testing
 Bone Density Digital X-Ray



November 18, 2013 MCMS

November 18, 2013 MCMS Annual Meeting



THE MACOMB COUNTY MEDICAL SOCIETY HELD ITS ANNUAL MEETING ON MONDAY, NOVEMBER 18 AT THE STERLING INN. Our guest speaker was President of the Michigan State Medical Society, Kenneth Elmassian, DO, a practicing anesthesiologist at McLaren Greater Lansing, where he serves as Director of Cardiovascular and Thoracic Anesthesiology, and Vice-Chairman, Department of Anesthesiology. During his presidential year, and as he has done throughout his career, Dr. Elmassian focuses on the importance of empowering patients and physicians, as well as strengthening the physician-patient relationship to ensure patients always come first in health care. Dr. Elmassian updated the members on the recent activities of the Michigan State Medical Society and led the group in a lively discussion of the ACA.











REPORTABLE DISEASES UPDATE



Macomb County Health Department Reportable Diseases Summary
Diseases Reported - Note: Cumulative total for previous years; year-to-date for DECEMBER 2013

AIDS.		2013	2012	2011
AMEBIASIS	AIDS			
BLASTOMYCOSIS 0 0 0 0 0 0 BOTULISM (FOODBORNE) 0 0 0 0 0 0 BOTULISM (INFECTIOUS) 0 0 0 0 0 0 BRUCELLOSIS 0 0 0 0 0 0 0 CAMPYLOBACTER 68** 118** 141*** 141*** 141*** 141*** 141*** 141********				
BOTULISM (FOODBORNE). 0 0 0 0 0 BOTULISM (INFECTIOUS) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
BOTULISM (INFECTIOUS) 0 0 0 0 0 BRUCELLOSIS 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
BRUCELLOSIS 0 0 0 0 1 CAMPYLOBACTER 68** 118** 141** CHICKENPOX. 40** 46** 56** CHLAMYDIA 2,463 2,393 1,957 COCCIDIOIDOMYCOSIS 2 2 2 3 CREUTZFELDT JAKOB 0 0 0 2 CRYPTOCOCCOSIS 1 6 2 CRYPTOSPORIDIOSIS 7 2 5 DENGUE FEVER 0 1 0 0 0 DIPHTHERIA 0 0 0 0 0 EHRLICHIOSIS 0 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 1 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0				
CAMPYLOBACTER				
CHICKENPOX	CAMPYLOBACTER	68**	118**	141**
COCCIDIOIDOMYCOSIS. 2 2 3 3 CREUTZFELDT JAKOB 0 0 2 CRYPTOCOCCOSIS 1 6 2 CRYPTOSPORIDIOSIS. 7 2 5 DENGUE FEVER. 0 1 0 0 0 DIPHTHERIA 0 0 0 0 0 EHRLICHIOSIS 0 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS. 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0				
COCCIDIOIDOMYCOSIS. 2 2 3 3 CREUTZFELDT JAKOB 0 0 2 CRYPTOCOCCOSIS 1 6 2 CRYPTOSPORIDIOSIS. 7 2 5 DENGUE FEVER. 0 1 0 0 0 DIPHTHERIA 0 0 0 0 0 EHRLICHIOSIS 0 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS. 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0	CHLAMYDIA	2,463	2,393	1,957
CREUTZFELDT JAKOB 0 0 2 CRYPTOCOCCOSIS 1 6 2 CRYPTOSPORIDIOSIS 7 2 5 DENGUE FEVER 0 1 0 0 0 0 DIPHTHERIA 0 0 0 0 0 0 EHRLICHIOSIS 0 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 3 ENC POST OTHER 2 3 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0 0	COCCIDIOIDOMYCOSIS	2	2	3
CRYPTOCOCCOSIS 1 6 2 CRYPTOSPORIDIOSIS 7 2 5 DENGUE FEVER 0 1 0 DIPHTHERIA 0 0 0 0 EHRLICHIOSIS 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0	CREUTZFELDT IAKOB	0	0	2
CRYPTOSPORIDIOSIS 7 2 5 DENGUE FEVER 0 1 0 DIPHTHERIA 0 0 0 EHRLICHIOSIS 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 E. COLI 0157 **** **** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 <td>CRYPTOCOCCOSIS</td> <td>1</td> <td>6</td> <td>2</td>	CRYPTOCOCCOSIS	1	6	2
DIPHTHERIA 0 0 0 EHRLICHIOSIS 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** <td>CRYPTOSPORIDIOSIS</td> <td>7</td> <td>2</td> <td>5</td>	CRYPTOSPORIDIOSIS	7	2	5
EHRLICHIOSIS 0 0 1 ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 GUILIAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0 <td>DENGUE FEVER</td> <td>0</td> <td>1</td> <td>0</td>	DENGUE FEVER	0	1	0
ENCEPHALITIS PRIMARY 0 8 3 ENC POST OTHER 2 3 3 E. COLI 0157 *** *** *** FLU-LIKE DISFASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0	DIPHTHERIA	0	0	0
ENC POST OTHER 2 3 3 3 E. COLI 0157 *** *** *** *** FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS. 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0				
E. COLI 0157				
FLU-LIKE DISEASE 42,984 36,172 45,682 GIARDIASIS 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS C (CHRONIC) 139** 152** 121** HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0	ENC POST OTHER	2	3	3
GIARDIASIS. 17 24 20 GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0				
GONORRHEA 557 530 501 GRANULOMA INGUINALE 0 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0	FLU-LIKE DISEASE	42,984	36,172	45,682
GRANULOMA INGUINALE 0 0 0 0 0 0 0 0 GUILLAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 0 1 1 HEPATITIS A 7 1 4 14 HEPATITIS B (ACUTE) 7 4 14 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 0 1 0 HEPATITIS E 0 3 0 0 1 1 0 HEPATITIS E 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0 0 0	GIARDIASIS	17	24	20
GUILIAIN-BARRE SYNDROME 7** 5** 5** HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0	GONORRHEA	557	530	501
HEMOLYTIC UREMIC SYN 0 0 1 HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0				
HEPATITIS A 7 1 4 HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0				
HEPATITIS B (ACUTE) 7 4 14 HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0				
HEPATITIS B (CHRONIC) 139** 152** 121** HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0	HEPATITIS A	7	1	4
HEPATITIS C (ACUTE) 7 6 4 HEPATITIS C (CHRONIC) 502** 598** 603** HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0	HEPATITIS B (ACUTE)	7	4	14
HEPATITIS C (CHRONIC) .502** 598** .603** HEPATITIS D 0 1 .0 HEPATITIS E 0 3 .0 H. FLU INVASIVE DISEASE 10 8 .12 HISTOPLASMOSIS 2** 7** .5** INFLUENZA, NOVEL 0 .0 .0				
HEPATITIS D 0 1 0 HEPATITIS E 0 3 0 H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0	HEPATITIS C (ACUTE)	7	6	4
HEPATITIS E				
H. FLU INVASIVE DISEASE 10 8 12 HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0				
HISTOPLASMOSIS 2** 7** 5** INFLUENZA, NOVEL 0 0 0				
INFLUENZA, NOVEL				
KAWASAKI SYNDROME				
	KAWASAKI SYNDROME	8	6	4

	2013	2012	2011
LEGIONNAIRE'S DISEASE	31	15	29
LISTERIOSIS	1	1	2
LYME DISEASE	0	0	2
MALARIA	0	4	3
MEASLES	0	0	0
MENINGITIS VIRAL	73**	75**	75**
MENINGITIS BACTERIAL/BACTEREN			
(EXCLUDING N. MENINGITIDIS)	4	6	8
MENINGOCOCCAL DISEASE	0	0	0
MUMPS			
PERTUSSIS	92**	30**	60**
POLIO			
PSITTACOSIS			
Q FEVER	1	0	0
RABIES ANIMAL			
RABIES HUMAN			
REYE SYNDROME			
ROCKY MNTN SPOTTED FVR			
RUBELLA			
SALMONELLOSIS			
SHIGELLOSIS			
STEC***			
STREP INVASIVE DISEASE			
STREP PNEUMO INV DS			
SYPHILIS			
SYPHILIS CONGENITAL			
TETANUS			
TOXIC SHOCK SYNDROME			
TUBERCULOSIS			
TULAREMIA			
TYPHOID FEVER			
VIBRIOSIS			
VISA			
WEST NILE VIRUS			
YERSINIA ENTERITIS	0	0	2

^{**}REFLECTS BOTH PROBABLE & CONFIRMED CASE REPORTS

January/February 2014 Index of Display Advertisers

ADVERTISER	PAGE
SCW Agency Group, Inc.	6
South Macomb Internists, PC	7
ProAssurance	8
Henry Ford Macomb Obstetrics & Gynecology	10
My Doctor's Inn	13
Dr. L. Reynolds & Assoc.	14
Internal Medicine Associates	17
Cataract & Eye Consultants of Michigan	17
St. John Macomb-Oakland Hospital	Back Cover

Medical Records of Retired Physicians

Patients looking for their medical records from retired physicians frequently contact the MCMS. If you are retired or will be retiring shortly, please contact the MCMS at 810-387-0364 or email mcms@msms.org and let us know how patients can retrieve their records. If the records have been destroyed, please inform us of that also so we can note our database accordingly. Thank you!

^{***}New category of Shiga-toxin producing Escherichia coli per MDCH in 2010; combo of E. coli & Shiga Toxin 1 or 2

Not just any doctor can wear this.

Being a doctor for Southeast Michigan's leading provider of faith-based care is more than a job. It's a calling. That's why wearing this coat means so much to them, from world-renowned oncologists to nationally recognized cardiac specialists. It represents their commitment to healing the mind, body and spirit ans embodies the faith we place in them to never stop fighting for their patients. Our doctors may slip off their coat at the end of a day, but, their passion for healing remains. That's why they're part of the St. John Providence Health System.

For more information about a St. John Providence Health System hospital near you, visit stjohnprovidence.org or for a physician referral call 866-501-DOCS(3627).





A PASSION for HEALING