



Vanderburgh County Medical Society
Evansville Indiana

Volume 38 | Issue 3

MONITOR

PHYSICIANS DEDICATED TO THE HEALTH OF THE COMMUNITY



SAVE THE DATE!



Vanderburgh County
Medical Society

GOLF
SCRAMBLE

MAY 19TH, 2025 11:00 AM
Oak Meadow Country Club

Foursome
\$600



PRESIDENTIAL
SPONSOR

PROCEEDS TO BENEFIT ECHO
COMMUNITY + HEALTHCARE CLINIC &
MEDICAL EDUCATION FOUNDATION
PROGRAMS



Wellness 360

Medical Education Foundation

Better Health Through Balanced Living



VCMS Members receive:

- **Wellness 360°** – A program offering confidential whole-person care in a safe, supportive environment where medical professionals receive a customized plan to promote a healthy life balance.
- Six complimentary sessions with Health and Wellness Coach, Social Worker, or Psychologist. One complimentary meeting with the Financial coach that includes a Legacy Planner and one complimentary session with the Retirement Coach.
- Spouse Access to Wellness 360° includes three complimentary sessions with Health and Wellness Coach, Social Worker, or Psychologist.
- Discounted coaching with Dike Drummond, MD Team
- Wellness, Financial, and Legal Seminars provided with coaching and CME
- Discounted Auto Buying Concierge Program through Kenny Kent Toyota
- Home buying concierge program through Team McClintock (Talk To Tucker)
- Advocacy for physicians and patients at the state and local levels that includes a forum to submit your legislative concerns
- Bi-monthly informative newsletter, "The Monitor"
- Validation of your training and your membership for patients
- Social Mixers
- Interactive family events that include your children of all ages
- Executive Board Member Opportunities

BOARD MEMBERS 2024



Heather Schroeder, M.D.
Immediate Past President



Syed Ali, M.D.



Jason Bredenkamp, M.D.



Christian Bueschel, M.D.



Julie Caldwell, M.D.



Chris Chacko, M.D.



Heidi Dunniway, M.D.



Kathryn Lannert, M.D.

CONTENTS |

Golf Scramble Save the Date Front Cover

Wellness 360° 2

VCMS Board Members..... 3

From the Desk of the Health Officer..... 5
by Ken Spear, M.D., Vanderburgh County Health Officer

The Rise of At-Home Medical Tests: Can the Hype Meet our Health-Care Needs?6-7
by Aneesha Dhargalkar, MD and Deanna Lernihan, MPH

There’s More to Sleep Than Shuts the Eye 8-9
by Jim Schroeder

VCMS Golf Scramble Highlights..... 10-14

Understanding Taxes on Real Estate Gains.....15
by Kemper CPA Group

Discounts for VCMS Members 16-17

Vanderburgh Medical Alliance News.....18

VCMS Member’s Birthdays19



The Vanderburgh County Medical Society is an Alliance of Physicians dedicated to the promotion of the Art and Science of medicine, to the continual Improvement of Community Health, and to the Advocacy and Protection of the Patient Physician Relationship. The purpose of this organization shall be to unite and strengthen the local medical community, to inform the public on matters of health and medical care, and to promote the best in medical care in our community.

What's your NEXT?



Get the funds you need
to dream big!

Smartest Home Equity Line of Credit

Let's find a way!

Ask for details or apply online at
germanamerican.com



German American Bank

Member FDIC

*Subject to credit and
underwriting approval.



The Bauerhaus Corporate Events

WE PROVIDE EVERYTHING FOR AN EXTRAORDINARY DAY.

- Weekday Luncheons
- Weeknight Dinner Meetings
- Summer Picnics
- Holiday Parties
- Retirement Celebrations
- Appreciation Banquets
- Conferences & Seminars
- Staff Retreats
- Breakfast Summits
- Mobile Catering
- Serving groups from 20-550 guests



Evansville's premiere private venue with executive catering, black-tie staff, licensed bar services, and professional event coordination executed in harmony to turn your plans into an experience to remember.

812.867.3169 • THEBAUERHAUS.COM
13605 DARMSTADT ROAD, EVANSVILLE, IN



BAUERHAUS Catering



"VOTED EVANSVILLE'S BEST!
CORPORATE & EVENT
CATERING SERVICES"

AT OUR VENUE

OFFICE CATERING

EVENT CATERING



DISCOUNTED WEEKDAY ROOM RENTALS

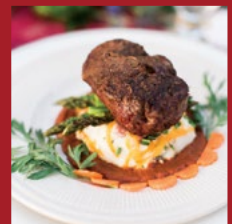
- BANQUETS
- DINNER MEETINGS
- SEMINARS
- HOLIDAY PARTIES

20-500 GUESTS



- BREAKFAST
- BOX LUNCH
- LUNCH & DINNER BUFFETS
- APPETIZER TRAYS
- DESSERTS
- DRINKS

\$150 MINIMUM ORDER



ONE CALL DOES IT ALL! AWARD WINNING CATERER

- DROP-OFF
- FULL SERVICE
- LICENSED BAR
- RENTAL ITEMS

DELIVERING TO ALL
TRI-STATE BUSINESSES

For our menus, bauerhauscatering.com.

NEED A PLACE TO HOST YOUR MEETING OR EVENT?
THEBAUERHAUS.COM • 812.759.9000

FROM THE DESK OF THE HEALTH OFFICER

KEN SPEAR, M.D.
VANDERBURGH COUNTY
HEALTH OFFICER

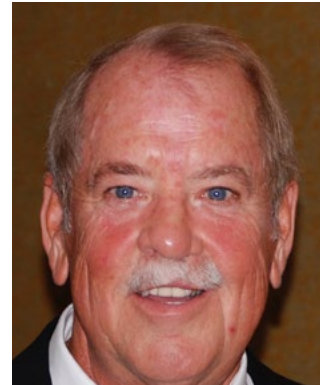
Significant effort has been applied to the issue of infant mortality in Vanderburgh County.

The Health Department has a program called Pre to 3, a home visitation program that supports expectant parents and/or new caregivers. Enrollment can be completed prenatally or until the infant is 90 days old. There are other programs in the State, including Nurse-Family Partnership (Funded by Goodwill) and Healthy Families Indiana, which is sponsored and funded by DCS.

The Pre to 3 Program is unique in that there are no eligibility criteria related to income, social circumstances, or the gravidity of the potential client. All clients are welcome. The only qualifier is at enrollment, where the client can enroll prenatally or until the child is 90 days old. This program can offer support to families until the child is 3 years old with weekly, bi-weekly, or monthly visits, depending on the child's age. The visits taper off as the child gets older to foster and promote family self-sufficiency.

Multiple data sets demonstrating the program's successes are available and will be sent to anyone interested in seeing them. Infant mortality is a complex issue that requires addressing a multitude of health and social aspects. These include items such as access to health care, insurance status, transportation access, food access, housing, education, employment, resiliency, and self-sufficiency.

A new collaborative was recently instituted called the Community Action Team (CAT). This collaborative is comprised of approximately 40 to 50 community partners. The goal of the CAT is to take recommendations from the Fetal/Infant Mortality Review (FIMR) team and put them into actionable interventions. Currently, the CAT is focusing on addressing areas such as transportation, housing, substance use/behavioral health access, and safe sleep awareness. The CAT has subcommittees for these areas, and action plans are being developed to ultimately improve birth outcomes and infant mortality in our community.



WE LOVE HEARING FROM OUR MEMBERS!!!

If you have content you would like to contribute for the Monitor
please contact Chris at 812-475-9001.

THE RISE OF AT-HOME MEDICAL TESTS: CAN THE HYPE MEET OUR HEALTH-CARE NEEDS?

ANEESHA DHARGALKAR, MD
AND DEANNA LERNIHAN, MPH
PHYSICIAN

AUGUST 17, 2024

Recent news feeds are packed with consumer tips for navigating the abundance of at-home medical tests. Within the past month, Healthline, Fortune, Self Magazine, and the New York Times, to name a few, have published articles on “best of” medical tests for a range of health conditions, from herpes and HIV to COVID-19 and thyroid function.

At-home medical tests are a booming market, expected to reach \$9.5 billion by 2031. It’s no surprise given their accessibility (available online or at local shopping centers), relatively low cost, and quick results. There is an impressive selection of well-established and start-up companies offering a vast array of tests for heart health, thyroid function, colorectal cancer, and chronic kidney disease, to name a few. What’s more, the tests are portable. We can use them where we’re at with as much privacy as we choose.

Health consumers can now take charge of their health without waiting for signs of illness or an opening in their physician’s schedule, allowing for early disease detection and better overall health outcomes.

Over half of the U.S. population copes with at least one chronic disease. At-home medical tests can provide substantial insight into these illnesses and support ongoing care. Many chronic diseases require regular laboratory tests. According to the CDC, 70% of medical decisions depend on these test outcomes. By putting tests in the hands of patients, frequent trips to testing sites can be eliminated, which is a necessary and long overdue support for vulnerable populations, such as rural communities that are medically underserved, older adults, people with disabilities, and barriers related to systemic racism.

Even in areas with better health coverage, Americans experience long waits for care. According to a 2022 AMN Healthcare Survey, the average wait time for a new patient appointment is 26 days. Appointment waits for cardiology and OB/GYN are longer, at 26.6 days and 31.4 days, respectively. Testing from home keeps health treatment plans on track while closing gaps in barriers to care.

However, despite their numerous advantages, popularity, and marketing hype, at-home medical tests are far from the easy fix we all would like.

One of the most critical issues with at-home medical tests is that a unified set of standards and protocols does not exist. This lack of regulation has resulted in the development of non-validated and unscientific testing methods that do not accurately provide information about the health condition in question.

CONTINUED ON NEXT PAGE

THE TRI-STATE'S
LOCAL CHOICE SINCE 1978



Hearing & Speech
Associates, Inc.

*Personalized
hearing healthcare:
your patients,
our priority*

Megan Grable
Au.D., CCC-A

Kara McCormick
Au.D., CCC-A



CALL TODAY! 812-425-1500

12500 Hwy 41 N, Ste. 6 • Evansville

Visit us online at evansvillehearing.com

The U.S. Food and Drug Administration (FDA) generally does not review wellness tests for biomarkers such as hormone levels and allergy-related antibodies for food sensitivities. A quick search of the FDA medical device database confirms this. Many popular at-home medical tests are not FDA-approved, leading to inaccurate and unreliable results that can skew patients' healthcare decisions.

For example, some at-home testing brands claim to determine tolerance and sensitivity levels for over 640 food items by analyzing just a couple of hair strands. However, no scientific study has validated hair testing as an accurate method for determining food sensitivity and allergies. Ultimately, such tests put health consumers at risk of false results and unnecessary or misguided dietary changes.

Another major disadvantage of at-home medical tests is the need for more clinician support and guidance regarding healthcare decisions related to test results. Many testing companies lack the adequate clinical support required to analyze and interpret test results. This often leads to inappropriate and possibly even dangerous health decisions related to a single data point. Clinician guidance is necessary so that lab testing can be viewed as part of an individual's whole health picture.

FDA recommendations on at-home tests strongly encourage regularly consulting with health care providers regarding lab test interpretation. Other reputable sources, such as Medline and Healthline, offer similar advice. However, the 2022 University of Michigan National Poll on Healthy Aging revealed that only half of all respondents 50 to 80 years old who purchased an at-home health test other than COVID-19 had shared test results with their healthcare providers. Such an omission is a missed opportunity for patients to discuss health concerns and next steps with their healthcare team. Better education of health consumers is needed to encourage data sharing and improve health outcomes.

The bottom line is that at-home medical tests are here to stay. Many Americans purchase these tests and use their results to make personal health care decisions. These tests can potentially provide valuable information to the health consumer while closing the gap in healthcare access. Still, improvements must be made with this relatively new process, specifically regarding regulation and clinician oversight, before it becomes a successful mainstay of the healthcare landscape.

Aneesha Dhargalkar is an emergency medicine physician. Deanna Lernihan is a public health professional.

An Array of Services – A Single Source

Talk to Prospects

- Marketing Mail
- Postcards
- Self-Mailers/Flyers
- Personalized Letters
- Mailing Lists
- Presort Bulk Mailing Services
- Brochures, Booklets & Catalogs

Stay In-Touch with Customers

- Newsletters & Postcards
- Presentation Pocket Folders
- Note Cards & Envelopes

Marketing Services

- Professional Marketing Guidance
- Logos & Graphic Design
- Copywriting Services

Office Operations & HR

- Bank Checks & Deposit Slips
- Carbonless Business Forms
- Envelopes & Letterhead
- Employee Manuals
- Labels
- Rubber Stamps
- Big B/W Copy Jobs
- Color Copy Jobs
- Bindery Services

Signs and Banners

- Posters and Banners
- Yard Signs
- Magnetic Signs
- Way Finding Signs
- Feather Flags
- Floor Graphics
- Wall Art
- Trade Show & POP Graphics
- Vehicle Graphics

Promote Your Brand

- Logo Pens
- Calendars
- Notepads

Nonprofits

- Event Promotions, Invitations
- Announcements
- Annual Reports
- Donor/Member Newsletters
- Fundraising Campaigns
- Personalized Donor Acknowledgments

Ovation Grafix
Marketing • Design • Print • Mail • Signs

Call 812.401.9100
Mail@OvationGrafix.com
www.OvationGrafix.com
1326 N Weinbach Avenue
Evansville IN 47711

Let's talk about your printing needs.
 Give us a call today.

THERE'S MORE TO SLEEP THAN SHUTS THE EYE

DR. JIM SCHROEDER

PART 1: WAKING UP TO ALL THAT SLEEP DOES



Every day, for most people, something mysterious begins to take shape that still defies scientists in these times. Although the primary reasons for most basic bodily functions, such as eating and moving, have been known for centuries, sleep, or also known as slumbering snoozing napping, or crashing, still remains an enigma in many ways. Yet, there is no single activity that we do more in our lives. It is largely controlled by two bodily systems and one earthly one. One, the circadian rhythms and sleep/wake homeostasis of our body tell us that the longer it has been since we slept, the more it is time to close our eyes. And two, the less light that we perceive, the more our brain (largely through the use of melatonin) tells us it is time for bed. The average person will sleep for 25 years in their lifetime. Infants typically sleep average between 14-15 hours a night. Toddlers spend half of their day horizontal. Even by the time our kids reach school age, we hope that their daily hours of sleep reach double digits.

Although researchers acknowledge that there is much to learn, what we do know increasingly sends one clear message. Sleep is vastly more than simply rest and quietness. It makes sense. Why would the human body spend a 1/3 of its time doing something unnecessary? In 2013, an article was published in the journal of *Scientific American* entitled, *Sleeps Role in Obesity, Schizophrenia, Diabetes...Everything*. In it, the authors provide an overview of the growing mountain of studies that point to the amazing potential, and significant risks, associated with different sleep patterns. Studies (e.g., Chase & Pincus, 2011) have long shown that roughly 90% of people diagnosed with anxiety disorders report sleep-reported problems, the latter potentially causing or worsening the former. We know that ADHD rates are higher in kids with poor sleep. We know that psychologically healthy kids look a lot like those diagnosed with ADHD when they are chronically sleep deprived (Paavonen et al., 2009). If you take kids with obstructive sleep apnea and ADHD symptoms and remove their tonsils and adenoids, the improvement in attention is typically much better than using medication. Shortened sleep duration in young kids is associated with a lifelong risk for obesity (Bell & Zimmerman, 2010). Long-term sleep deprivation mimics psychosis in healthy individuals. If you have sleep apnea, your risk for depression is fivefold; if you have depression, the risk of apnea is fourfold.

But sleep is not just about warding off disease and disability. Good sleep is associated with learning better and remembering more. It appears that our memory is better if we “sleep on it.” Taking naps after learning tasks results in greater recollection and retrieval than staying awake. Dreams, long the source of so many conjectures and theories, appear to not necessarily recreate what actually has happened, but create scenarios about events and tasks that likely serve many purposes. All of us, including athletes, (especially those in intense, ongoing training) often depend on sleep, including recovery naps, to repair the body. Exercise often improves sleep. Sleep often improves exercise. Roughly two-thirds of our growth hormone, which is involved with muscle development, is secreted during sleep. Sleep helps control when we feel full, and when it is time to eat in order to prepare for the day. Sleep appears to regulate our blood sugar. Studies suggest that going to bed earlier can help make a diet more successful. Even the types of foods and drinks we consume can significantly affect our sleep.

As we get deeper into the mystery, we know that not all sleep is created alike. There are stages of sleep, and patterns of sleep. Very simplistically, there are five primary stages of sleep—stages 1-4 and the Rapid Eye Movement (REM) phase. Stages 3 and 4 are considered deep, slow-wave sleep. The average child gets most of his deep sleep in the first three hours of the night (which diminishes as we get older). That is when issues, such as sleepwalking and sleep terrors, usually occur. Kids really aren't awake when this happens and therefore, can't remember a thing next morning. On the contrary, REM sleep, usually occurs for children after the 3rd hour and increases as the night goes on. This is when nightmares typically

CONTINUED ON NEXT PAGE

arise, which may wake the child up and leave memories in the morning. And somewhere in the night, we all have a “point of singularity”, which nearly coincides with where our body temperature reaches its lowest point. At this juncture, our core temperature begins to rise, cortisol secretion increases, and the proportion of REM sleep grows. Unbeknown to us, it is as if our body begins to prepare for another day.

For many, the science of sleep might be liable to, well, put them to sleep. But the further into the spindles we get, the more astounding and captivating it becomes. As Dr. Ruben Naimen noted in her book, *Hush: A Book of Bedtime Contemplations*, sleep becomes less about something we do, and more about who we are and the rhythms that we feel. It seems there is a psychophysiological, meta-physical, even spiritual nature to it all. Yet unfortunately, sleep appears to have become one more marketed commodity. In past two decades, artificial sleep aids have sharply risen (NCHS, 2013). Market research between 1998-2006 indicated sleep aid prescriptions for young adults (ages 18-24) had tripled (Russo, et. al, 2008). They come by many names, on and off label, prescription and over-the-counter, medication and supplement. But all concoctions used are intended to onset or enhance sleep, or completely sedate the people who use them. Meanwhile, many researchers suggest that 80-90% of sleep difficulties could be address through cognitive, behavioral, and lifestyle changes. Recently, the American Academy of Sleep Medicine (AASM) weighed in on this discussion through a document entitled *Five Things Physicians and Patients Should Question*. Advice #2: Avoid use of hypnotics as primary therapy for chronic insomnia in adults; instead offer cognitive-behavioral therapy, and reserve medication for adjunctive treatment when necessary. Advice #3: Don't prescribe medication to treat childhood insomnia, which usually arises from parent-child interactions and responds to behavioral intervention.

The great irony is that despite all our attempts to augment sleep, we are slumbering less than we did just a century before. Twenty percent less. There are many arguments why. Maybe our biological systems are evolving. Maybe our 24/7 culture and the lure of incessant media and bright lights, whether of a mobile screen or the conventional tube, are just too alluring. Maybe we think we can “beat the system” and get by just fine without adhering to time-honored needs. Years ago, I got to know a father who swore he didn't need any more than 4-5 hours of sleep a night. He was forty pounds overweight, anxious, irritable, divorced, and felt his only child was slowly parting from him. I challenged his assumptions about his need for sleep, and mused with him what just a couple of more hours a night could do for his quality of life. I am not sure if he ever saw how more darkness could lead to more light.

And maybe, just maybe, we simply don't value sleep like we do so many other things. I cringed a few years ago when I read a blog written by someone about how to truly be a successful professional. One of the messages was simple: get used to living with less sleep. It seemed like a falsity laden with strong undertones that went well beyond the zzz's. It echoed of a message we hear elsewhere, which proclaims that whatever we could find outside of ourselves—money, status, power—is well worth sacrificing what we can find within. Of course, what he forgot to mention was that even if the false promise was true (which it is not), it is only plausible for the few who could make it as he aspired. Sleep, on the other hand, is given to everyone, even though for some, it seems like a nightmare, not a remedy. As a father, I never knew just how much I loved my sleep until my first kids were born. There are times when sleep might just be the most important and productive part of my day.

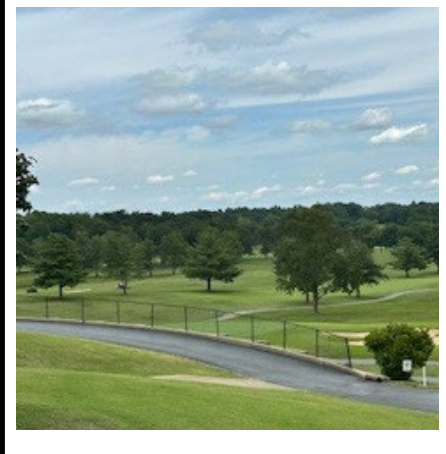
It is time to reclaim the value of the Betty White party, or counting our sheep, and just get some old-fashioned shut-eye. It is time to stare down the screen and let it know that the bed is calling. I think we would all be happier and really not miss a thing. Better yet, I (and many others) think that when the demands of the day do come calling, striving for optimal sleep will only allow us to be more productive, healthier, more patient, and more loving than before. And it could all be free.

Bell, J.F. & Zimmerman, F. J. (2010). Shortened nighttime sleep duration in early life and subsequent childhood obesity. *Archives of Pediatric & Adolescent Medicine*, 164, 840-845.

Chase, R. M., & Pincus, D. B. (2011). Sleep-related problems in children and adolescents with anxiety disorders. *Behavioral Sleep Medicine*, 9, 224-236. doi: 10.1080/15402002.2011606768

Russo A, Miller K, Marder W. Prescription sleep aid use in young adults. Thomson Reuters Research Brief. 2008.

2024 VCMS Golf Scramble Physicians Division



2024 VCMS Golf Scramble Non-Physicians Division



2024 VCMS Golf Scramble Non-Physicians Division



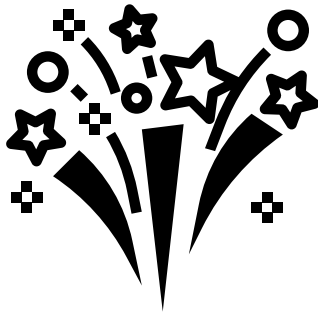
2024 VCMS Golf Scramble Ladies Division



2024 VCMS Golf Scramble

Contests!

**CLOSEST
TO PIN**



Ed Balbach

**LONGEST
PUTT**



Kyle Kempf

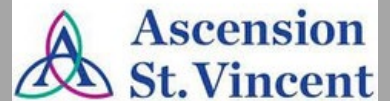
**LONGEST
DRIVE**

Craig Maier

Thanks to our sponsors!



EVANSVILLE
SURGICAL
ASSOCIATES



Dr. Santi & Marty Vibul

UNDERSTANDING TAXES ON REAL ESTATE GAINS

AUGUST 20, 2024



Let's say you own real estate that has been held for more than one year and is sold for a taxable gain. Perhaps this gain comes from indirect ownership of real estate via a pass-through entity such as an LLC, partnership, or S corporation. You may expect to pay Uncle Sam the standard 15% or 20% federal income tax rate that usually applies to long-term capital gains from assets held for more than one year.

However, some real estate gains can be taxed at higher rates due to depreciation deductions. Here's a rundown of the federal income tax issues that might be involved in real estate gains.

Vacant Land

The current maximum federal long-term capital gain tax rate for a sale of vacant land is 20%. The 20% rate only hits those with high incomes. Specifically, if you're a single filer in 2024, the 20% rate kicks in when your taxable income, including any land sale gain and any other long-term capital gains, exceeds \$518,900. For a married joint-filing couple, the 20% rate kicks in when taxable income exceeds \$583,750. For a head of household, the 20% rate kicks in when your taxable income exceeds \$551,350. If your income is below the applicable threshold, you won't owe more than 15% federal tax on a land sale gain. However, you may also owe the 3.8% net investment income tax (NIIT) on some or all of the gain.

Gains from Depreciation

Gain attributable to real estate depreciation calculated using the applicable straight-line method is called unrecaptured Section 1250 gain. This category of gain generally is taxed at a flat 25% federal rate unless the gain would be taxed at a lower rate if it was simply included in your taxable income with no special treatment. You may also owe the 3.8% NIIT on some or all of the unrecaptured Section 1250 gain.

Gains From Depreciable Qualified Improvement Property

Qualified improvement property (QIP) generally means any improvement to an interior portion of a nonresidential building that's placed in service after the date the building is placed in service. However, QIP does not include expenditures for the enlargement of the building, elevators, escalators or the building's internal structural framework.

You can claim first-year Section 179 deductions or first-year bonus depreciation for QIP. When you sell QIP for which first-year Section 179 deductions have been claimed, gain up to the amount of the Section 179 deductions will be high-taxed Section 1245 ordinary income recapture. In other words, the gain will be taxed at your regular rate rather than at lower long-term gain rates. You may also owe the 3.8% NIIT on some or all of the Section 1245 recapture gain.

What if you sell QIP for which first-year bonus depreciation has been claimed? In this case, gain up to the excess of the bonus depreciation deduction over depreciation calculated using the applicable straight-line method will be high-taxed Section 1250 ordinary income recapture. Once again, the gain will be taxed at your regular rate rather than at lower long-term gain rates, and you may also owe the 3.8% NIIT on some or all of the recapture gain.

Tax planning point: If you opt for straight-line depreciation for real property, including QIP (in other words, you don't claim first-year Section 179 or first-year bonus depreciation deductions), there won't be any Section 1245 ordinary income recapture. There also won't be any Section 1250 ordinary income recapture. Instead, you'll only have unrecaptured Section 1250 gain from the depreciation, and that gain will be taxed at a federal rate of no more than 25%. However, you may also owe the 3.8% NIIT on all or part of the gain.

Plenty To Consider

As you can see, the federal income tax rules for gains from sales of real estate may be more complicated than you thought. Different tax rates can apply to different categories of gain. And you may also owe the 3.8% NIIT and possibly state income tax, too. We will handle the details when we prepare your tax return. Contact us with questions about your situation.

DISCOUNTS FOR VCMS MEMBERS |



Kenny Kent Lexus and Kenny Kent Toyota wish to provide the Vanderburgh Medical Society's Tri-state area physicians a program that addresses time constraints and navigation through the purchasing process and servicing of their vehicles. The Kenny Kent Toyota and Kenny Kent Lexus programs enhance the automotive purchasing and servicing experience with savings and convenience.

The Program:

- Designated dealership personnel are assigned to administer the Vanderburgh County Medical Society's both sales and service programs. Please identify the VCMS's affiliation when working with us.
- Test Drive – Vehicles delivered to Vanderburgh County Medical Society physicians for review.
- Pricing – Vanderburgh County Medical Society pricing for each vehicle.
- Purchase On-Line and Trade-In On-Line are available. Delivery of a vehicle may occur at an office, home, or the Kenny Kent Toyota or Kenny Kent Lexus dealership.
- Complimentary concierge service makes servicing very convenient. Program available Monday through Friday with drop off at 8 am and return by 2:30 pm. Designated drop off and pick up for physicians established by VCMS.
- You will receive a \$100 accessories gift card redeemable at Kenny Kent Toyota or Kenny Kent Lexus Parts when you purchase a new Toyota or Lexus from Kenny Kent.

We look forward to offering this unique opportunity for an exemplary purchase and service experience.

DISCOUNTS FOR VCMS MEMBERS |

Team McClintock

CONCIERGE SERVICE

for Members of the Vanderburgh County Medical Society

From start to finish, Team McClintock will manage the purchase of your home by assisting with all your real estate and related needs. We are your advocate in this entire process. All from the comfort of home or your busy office...

FINDING THE PERFECT HOME

- Send electronic "wish" and "needs" list to team member
- New listings will be emailed to you when listed
- Agent will Facebook or Skype from any of the homes of interest
- Agent will set up instant showings to meet your busy schedule
- Provide comps within hours of viewing any homes
- Gather community and school information
- Write offer, negotiate, provide counters all via phone and electronically

MAKING SURE IT'S THE RIGHT ONE

- Agent will set up all inspections at home and arrange for payments to be made at closing
- Agent will review all inspections, order any necessary additional inspections/estimates
- Work with you to respond to the inspections electronically
- Provide a Supreme Homes Buyers Warranty for one full year at closing

FINISHING THE JOB

- Help to identify lender, work with lender to provide information needed
- Pick up your earnest money check at home or office, deliver to Listing Agent
- Get Home Owner Insurance quotes
- Arrange for moving company
- Change utilities
- Facebook or Skype walk through prior to closing
- Attend closing at your home or office
- Provide a closing gift!
- Deliver the keys!!

It's that simple to move to the home of your dreams!

Team-McClintock.com • 812.777.5220 • F.C. Tucker Emge REALTORS®



VANDEBURGH MEDICAL ALLIANCE NEWS



The VMA welcomed in the new 2024 -- 2025 fiscal year in September with its first general membership meeting of the year. A big “Thank You” goes out to Geeta Rodrigues and her committee for planning our monthly general membership meetings and providing food for them! Alliance members also enjoy two monthly social activities, Foodie Group and Book Club, as well as an annual Holiday Party and Valentine party. We invite those eligible to be Alliance members (spouses or partners of physicians or physicians) to attend any of the social and fundraising activities. To join our organization, use the QR code to the right. Information about the VMA may be found on our website, vanderburghmedicalalliance.org. or by contacting an Alliance member.



During the month of July, Alliance members helped to greet and hand out event bags to attendees at the Vanderburgh Medical Society’s “Destination Wellness,” a free interactive children’s event, at the Children’s Museum of Evansville. Additionally, Alliance members generously donated \$2,000 to underwrite the event. The VMA provided volunteers at the VCMS’s Annual Golf Outing August 12th. This year’s outing was particularly exciting – a golfer came within inches of hitting a hole-in-one for the car.

The VMA is in the middle of their grant cycle during which we will offer \$10,000 to health-related charities in our community. We also offer scholarships from current funds to both high school and medical school students. When we send out funding requests, we hope you’ll consider helping us. We are a 501©3 organization, so your donations are tax-deductible.

We hope to see you soon!

Sabrina Koleilat & Marty Vibul
Co-Presidents, Vanderburgh Medical Alliance

VMA members volunteering at the Tri-State Food Bank in March.



MEMBER BIRTHDAYS |

September

Erik B. Throop, MD 9/1
Tony A. Findley, MD 9/3
Terry W. Talley, MD 9/4
Samir K. Gupta, MD 9/6
Cornelius E. Healy, MD 9/6
Ryan D. Meyer, MD 9/6
Jessica M. Cox, DO 9/7
Michael J. Malchioni, MD 9/10
M Adam Hubbard, MD 9/11

Caleb R. Birchler, DO 9/12
Mary A. Bieker, MD 9/13
Jonathan S. Austin, DO 9/15
Thomas L. Cook, MD 9/15
Devon W. Fetters, MD 9/16
Vianne D. Perdido, DO 9/16
Anthony L. Funke, MD 9/19
Anna K. Dauer, MD 9/21
Samuel L. Fitzsimmons, MD 9/21

Anthony D. Kaiser, MD 9/22
Curtis E. Shinabarger, MD 9/22
Kristi K. Peck, MD 9/23
Randall J. Krystosek, MD 9/27
Stewart P. Smith, Jr., MD 9/27
Irvin L. Heimburger, MD 9/28
Ned P. Rule, MD 9/29

October

John F. Ansbros, MD 10/1
Gardar Gislason, MD 10/1
Reinaldo F. Pastora, MD 10/3
Daniel R. Shirey, MD 10/4
Heather B. Matheson, MD 10/5
Ahmet K. Percinel, MD 10/5
Roberto C. Iglesias, MD 10/5
Hongyu Yang, MD 10/5
Jeffrey L. Bohling, MD 10/8
Marshall S. Miller, MD 10/8
John C. Huus, MD 10/10

Hoang S. Tran, MD 10/10
Mallory S. Bray, MD 10/12
Ronald W. Sowa, MD 10/14
Phillip L. Stiver, MD 10/14
Ward E. Harbin, DO 10/15
Mariellen Dentino, MD 10/16
Deborah K. Goldman, MD 10/16
William G. Wooten, MD 10/16
Ralph A. Sellers, II, MD 10/17
Michelle A. Boger, MD 10/18
Robert W. Ransdell, MD 10/18

James A. Robertson, MD 10/18
Joseph F. Waling, MD 10/18
Herman F. Rusche, MD 10/20
Chris E. Chacko, MD 10/22
Scott W. Hardigree, MD 10/23
John B. Oak, MD 10/25
David J. Marienau, MD 10/25
William Ante, MD 10/26
Frank J. McDonnell, MD 10/27
R Chad Perkins, MD 10/31





Vanderburgh County Medical Society
Evansville Indiana

Volume 38 | Issue 3

MONITOR

PHYSICIANS DEDICATED TO THE HEALTH OF THE COMMUNITY

3116 E. Morgan Ave., Suite F • Evansville, IN 47711