VANDERBURGH COUNTY MEDICAL SOCIETY

ANNUAL GOLF SCRAMBLE
Supporting Indiana University medical student scholarships - Evansville as well as VCMS Programs

Monday, May 6, 2019
Victoria National Golf Club
Congratulations to our new managers!
Barbara Joines
Karen Schu
Stacey Fisher
Michele Merriman

To request a quote, contact:
Brenda Wallace, CPA, CMPE
812.491.1347
bwallace@hsccpa.com

or visit www.hsccpa.com/medical-billing

Real Relationships.
As young professionals we were looking for a firm we could build a great working partnership with and found it at Harding, Shymanski. They have helped us in everything from personal accounting, to transitioning and buying our practice, and now taking care of our business accounting and questions. We really love working with Harding, Shymanski.

Drs. Adam and Allison Frounfelter
All in the Family Dental

Contact Michele Graham, CPA, MST
812.491.1360
mgraham.hsccpa.com
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Isn’t that what you signed up for?

Recently I was asked this question, and it really got me to thinking. I was seeing patients in the office and at one point was asked this question by my staff. You see, I was complaining about how many patients were stacked into the afternoon session and how I was already an hour behind. Granted, it does not take me very long to get behind for those who know me. You certainly want to get the diagnosis and the treatment right, but you also want to make sure it is a good experience for the patient, as satisfaction scores and surveys play a role in our practice. Of course, with all of those patients seen comes all their charts and the documentation. I know there are many of you out there who join me in spending a couple of hours (or few hours in my case), staring at a computer screen cleaning up the charts from the day. And with my complaints that day, my staff member posed the question, “Isn’t that what you signed up for?” What was being implied was that when we chose to be doctors, doesn’t all that just come with the territory?

After the office winded down, I sat down to work on the computer, that conversation really got me thinking about things. When we chose to be physicians, did we really sign up for all this? Did we realize that there would be so many extra pressures and stresses pulling on us? Did we understand how many countless hours would be required of us, how much we would have to sacrifice- from our time in school to residency and to now in practice? Even for someone like me who trained in the 80-hour work week, residency was a challenge, but many of our senior colleagues were a part of a time when it was expected to have a 120 or 140-hour work week during their training years. It was truly a “residency” in the fullest sense of the word in those days. Did we realize the time we would spend obtaining preauthorization for medicines or procedures? Did we anticipate the EMR and how our medical practice would be shaped by it? And for many of us, how many hours would be spent typing or dictating and staring at a screen?

So is this what I signed up for? Well, for me the answer is yes and no. I am not really sure I knew what I was signing up for. I only thought of how incredible it would be to be a physician with the responsibility and rewards associated with the position. It is an honorable profession and humbling experience to be able to do a good work in helping our fellow human being through sickness and in wellness. Who would have thought of all the other stuff that would come with this title? And while I do not have all the answers, this indeed is a good conversation piece about our purpose and where we are in our careers, and what we need to do to make things better.

One thing I can say, when we signed up to join the medical society, we are signing up to make a difference. We are joined together with our medical brethren looking to advocate for our patients, our medical profession, and for you and your families. By signing up, your medical society can support physicians in all phases of their career- from the student to the retiree. With your support, we have been able to launch the Wellness 360 program to help prevent physician burnout and have now expanded the program to promote advanced practice providers. By signing up, you are supporting our way of practice in Indiana through the efforts of the ISMA to preserve the medical malpractice cap that has been threatened by lawsuits the last couple of years. Together, we are physicians serving at the state and county level who are working to make things better. By signing up to be members of our medical society, you are a part of this movement, this community, this family and is something worth signing up for.
We care about your financial health.

Our team understands the financial concerns of medical professionals and offers customized financial solutions for each stage of your career, from start-up, to expanding, to looking for ways to improve your cash flow. Contact us today!
Reaching Out!

The Hub & White Swan Coffee Lab were full of smiles from TSMA members who gathered for their favorite latte during the cold weather. Our calendar includes fun projects, activities & wellness opportunities for our medical families & community.

We are honored to “Reach Out”!

Physician spouses are welcome and encouraged to join us.

TriStateMedicalAlliance.org

Ann Almquist, President
Happy New Year VCMS Members!

One thing that I love about a new year is a chance for new beginnings and trying out new routines and of course the dreaded new year’s resolutions. I won’t bore you all of my resolutions and how I am holding up with them so far! I will, however, share that exciting changes are on the horizon for the VCMS.

Through our new partnership with Lifetime Financial Growth, we are providing numerous workshops this year to help answer any questions you may have in regards to investing, disability products, estate planning, wills, and taxes. Please let us know if there is a topic that you would like to see covered. So far the feedback from these workshops has been favorable!

The VCMS recognizes that there are counties without representation when it comes to having a medical society. Our goal in 2019 is embracing these counties and smaller communities into our circle. As we continue to explore this vision, the VCMS will likely experience growth and enrichment through our existing programs as well as new ones. We are excited to move in this direction and believe that our society will be profoundly enhanced with these new voices!

As we move forward exploring options for improvement to our membership, we encourage you to get more involved and help mold and shape your society. The VCMS is not just a social outlet. We are your voice in this community and desire to bring passion and joy to the art of practicing medicine. Please be on the lookout for a survey that will be distributed to our membership as well as those who are not yet members. We appreciate your busy schedules but would appreciate your time in taking the survey to help us provide programs of worth to you.

As a reminder, our Executive Board meetings are open to anyone that is a VCMS member, and the schedule of these meetings are always listed in the back of this publication. You do not have to be a member of our executive team to attend meetings or to offer ideas. Please contact me if you are interested in attending a meeting so we may confirm that the scheduled meeting is taking place. There are times that we have to move a meeting due to busy schedules!

Lastly, we would love to hear from you in the Monitor! The Monitor is well read and is a respected publication in this community. Please consider sharing your expertise or commentary on medical topics that could be beneficial for others to see. Also, If you know anyone that would be interested in advertising with us we are also open to exploring new partnerships.

There is no doubt that 2019 will probably go just as fast as its predecessor, so don’t put off another year. Renew yourself, get involved, make a difference in your medical community today!
Let’s find your dream home.

As real estate experts, Team McClintock is dedicated to exceeding client expectations by providing professional and personalized real estate services. We are committed to building strong relationships with our clients and with our community. Our agents bring diverse experience allowing us to provide exceptional knowledge and resources to our clients. In this fast-paced, dynamic industry Team McClintock is a passionate vanguard incorporating proven and cutting edge techniques in real estate sales to best serve our clients.

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VANDERBURGH COUNTY MEDICAL SOCIETY
ANNUAL GOLF SCRAMBLE
Supporting medical student scholarships
at Indiana University School of Medicine – Evansville

Monday, May 6, 2019
Victoria National Golf Club

Schedule of Events
11:00am - Registration
Noon - Shotgun start
5:30pm - Awards Reception

Cost per foursome: $850
Includes: green fees, golf cart, boxed lunch, player gift
beverages, hors d’oeuvres, reception, & prizes

Rules and Attire
Cutoffs, denim shorts, halter tops, and tank tops are not permitted
Shorts must be mid-thigh or Bermuda length
Gentlemen are asked to always wear collared golf shirts.
Metal spiked golf shoes are prohibited

About the Vanderburgh County Medical Society
For over 170 years, the Vanderburgh County Medical Society has been a friend and a
voice for Vanderburgh County physicians. The VCMS is an active community of
Tri-State-Area physicians that connect and build relationships with their colleagues
to enhance the health of the community.

Indiana University School of Medicine - Evansville Scholarship
The Vanderburgh County Medical Society values its close working relationship with
the Indiana University School of Medicine – Evansville Campus. It is important to the
VCMS to support the IUSM-E medical students to advance their education.
The proceeds of this golf scramble will provide scholarships to help relieve the
students’ substantial financial burden of obtaining a medical degree.
When you sponsor or participate in this event, your support will assist a student that
otherwise might not have funds to further their education.
Thoughts on a Snowy Day

As I write on this cold, snowy day, I find it hard to believe that it’s already the nineteenth day of 2019. It’s even harder to believe that this is the nineteenth year of the twenty-first century. There are actual kids in college now who have no memory of the twentieth century. You remember the twentieth century, don’t you, and Y2K? Remember the threat of massive computer systems failure and the end of the world as we knew it? It was kind of like the threat of the new Ice Age in the early ’eighties, or the end of the world in 2012, not just as we knew it, but The End of the World. I guess you could say that every night we go to bed, it’s the end of the world as we know it because every new day brings changes, some small, some big. It’s okay; I still feel fine.

But I digress. This contemplation on the passage of time has made me realize just how out of it I really am. Oh, I don’t mean demented (although there are some who will argue this point,) I mean culturally out of it. I am not sorry, either. There are five levels of cultural awareness. First, we’re with it. We know the music, the stars, the cars, the styles, and the language. Then, usually, when we have our own kids, we begin to lose touch with what’s happening and struggle to keep up. Next, we’re entirely out of it, and we regret it. Then we’re totally out of it, and we don’t care, and lastly, as I am now, we’re entirely out of it, and we’re proud of it.

How can I prove that my pride is justified and that I am really as backward and benighted as I claim? To wit:

- I watch no vampire shows, no zombie shows and no reality shows on television.
- I don’t do Twitter, What’s App or Instagram. The other day someone emailed me that they had placed the files they wanted me to see in Dropbox, I wrote him back and asked what the heck Dropbox was. (“You do show up on Facebook,” I hear you saying. Res ipsa loquitur.)
- I have CD’s, DVDs, a phone book and a desk calendar in my house. I even have an extensive collection of VCR tapes. I would be happy to make you a really good deal on them if you care to buy them.
- I still use punctuation. I know, I know, it’s outdated, but I still believe in the comma and the difference between “Let’s eat, Grandma,” and “Let’s eat Grandma.”
- I have never played “Angry Birds,” “Candy Crush,” or “Brick Breaker” on my cell phone. (I admit it. I do have a cell phone.)
- I would rather call you and talk to you than text you.
- I curb my profanity in polite company.
- I never have, and I mean never, taken a selfie.
- I’m not into yoga, hot or cold, or pilates.
- I don’t drink kale smoothies
- No tattoos.
- No piercings.
- Never had a man bun.
- Who the heck is Cardi B?

Don’t cry for me, Indiana (Illinois and Kentucky.) Don’t pity me because I’m missing out on all of these wonderful things. Who knows? Maybe one day I will take a selfie. The tattoos, the piercings, the man bun, and the kale smoothies, however, remain extremely unlikely.

Happy New Year.
Some of us have seen a movie one flew over the cuckoo’s nest. It is a comedy movie starring Jack Nicholson. The users of EHR especially the physicians remind me of Jack Nicholson after he was treated with heavy hands of the Nurse Ratched. In the end, he looked like all other residents of the mental asylum. It seems like the physicians have given up and lost part of their capabilities and potentials and succumbed to the heavy hands of the Government Mandated through CEOs orders ..... You will obey or else! They have burnt out or have Chronic EHR fatigue syndrome.

The employed hospitalists have no choice. The newer hospitalists have not known different ways. I have talked to several hospitalists and non-employed physicians. They have gotten accustomed to the time consuming, proportionally less productive care because of current EHR.

I just perused my two articles in the Monitor Magazine 2015 issue # 4, 2016 Issue # 4 and also my Resolution in ISMA annual convention 16-13 which passed and became AMA Resolution 211. I thought I had foresight, what will happen if my suggestions were ignored. Somewhere I mentioned, “if a building is constructed with crooked walls, it will surely one day come down on the ground flat.” The EHR is not there yet, but it is taking billions of dollars to straighten its walls. In my humble opinion, this approach will never correct multiple little but very wasteful problems. The beneficiaries, of course, the phantom engineers who are unreachable by common practicing physicians. They have their clinicians who do not have to face the difficulties almost at every step of new and improved EHR. It has been eight plus years that we have been with compulsory EHR, but like first graders, we are still learning how to read and write. We still have instructors assisting us which wouldn’t be necessary if the system was simplified.

Also, I have read the praises of EHRs. Improved patients care, Increased Patient participation, Improved care coordination, Improved Diagnostic and patient outcome, Practice efficiencies and cost savings, Less paperwork, financial incentives, etc., etc., etc. There is a lot of truth to these claims, but significant problems still are hovering over our heads.

Actually, the EHRs have made us more prone to malpractice lawsuits. The physicians do not remember what they have clicked inadvertently and have forgotten, but it can haunt them within a couple of years. Even if they remember to correct the mistake, it will take much effort to succeed.

I know there is 10.9 % decrease in surcharge premium in Patient Compensation Fund starting July 2019 renewals, but wait, till Trial Attorneys start sifting through our records.

The EHR is not going anywhere. It has been transfused in our veins, and we have to coexist with it. It is like an arranged marriage forced by the parents in some Eastern countries.

MY SUGGESTIONS:

1) The physicians who think that they spend too much and unnecessary time in admitting a patient, wasting time to enter appropriate orders through the given choices, and doing med rec, etc. may contact their EHR instructors and present their recommendations. The doctors are like sleeping giants who can make things happen. I hope they wake up someday soon. It definitely needs more than one or two physicians to be effective. Most of us don’t remember that we were called the captain of the ship in the metaphorical sense.

2) In our part of the State, we have SUNRISE and EPIC. Both are miserably time-consuming and reproduce unnecessary and wasteful data. We appreciate only when we have to make hard copies of patient records. It is voluminous and can be measured in pounds. If we can send a man to the moon with the help of computers, we can fix this little item also, only if we let the programmers know our concerns.

3) Even after 8-10 years of implementation of EHR, in the offices, we spend more time wrestling with the computers and much less time looking at and satisfying the patients. Patients go home unsatisfied with 3 minutes of doctor time, but the record of the visit is 10-page long suggesting at least 1/2 hour’s work. Some physicians stay in the office 1-2 hour longer to complete the chart so they can see more patients. It is time to improve this, and it can be done.

4) I said it before and will say it again. We need to take a step back and make the bases of the grand building of EHR strong with its walls straight upright and leak-proof roofs so it will not crumble down and cost billions of dollars in repairs. It can be done. We have enough information now without digressing into wasteful experiments. So far I get the answer “It is not going to happen.” Well, the improvement (repairs) already are costly, paid by the consumers, and burden on the physicians, nurses, nurse techs and others without extra compensation.

5) Those who have brilliant ideas and are not a member of the local medical societies and ISMA yet, think about becoming one. You may not have to speak as loud and yet be heard. The money invested will come back to you many folds.
We are extremely pleased to announce a valuable new alliance with Lifetime Financial Growth, a member of the Guardian Network, for VCMS members. The alliance has been established specifically to meet an array of needs within the medical community. We welcome your input on workshop topics you would like to see in the future and to schedule an individual appointment to learn more about how LFG’s products and services can truly help you get your financial life in balance.
I’M SO FAR BEHIND THAT I’M JUST CALLING IN SICK TO CATCH UP!

Have you done this?
Buried under a mountain of charts or paperwork that you alter your schedule and life to “catch up?”
Do you stay up after kids go to bed?
Go to the office early or on weekends?
Do you think, “God, I just want to stay caught up for once!!!??!!”

I’ll admit it…I’ve been there. Most weekends when I knew no one would be in the office, I would let myself in through the side door and worked like a mad woman for hours trying just to catch up.

That way on Monday morning, I could start without the weight of unfinished charts staring down on me. I would think, “I got to get this done, so I’m not behind.”

Countless hours were spent (uncompensated, by the way) doing the work that just couldn’t get done during the work day because there was just not enough hours to take care of patients well AND document.

Well, sister in medicine being behind on notes is NOT a personal character fault. You are not broken or inadequate! You are trapped in a system that is broken.

I believe that it is absolutely unethical and unacceptable for this practice to continue. So I’m saying BYE BYE unrealistic expectations (and hoping you will too).

Instead of being told, “If you don’t get your notes done, you will be suspended,” groups/organizations should be supporting their physicians, unburdening them from non-clinical tasks and allowing them to do what we do best….BE A DOCTOR.

And that is EXACTLY what the research is saying too!

Recently, I gave a presentation at the Indiana Osteopathic Association’s Winter Conference in Indianapolis with my talk titled “Factors to Improve Physicians Lives” that was based on hearing Dr. Lotte N. Dyrbye, one of the nation’s leader in physician wellbeing, present at the Coalition for Physician Wellbeing 2018 Conference.

After doing research, here’s partially what I presented and what I gathered from Dr. Dyrbye and others work...

EXTERNAL National Factors to Improve Physician Lives

1. Documentation Burden
   • In re to the clinical encounter: MUST be reduced and streamlined. (Billing requirements, quality reporting, test justification
   • In regards to “Doctor-only” task MUST have clarity regarding which duties are doctor essential

2. EHR
   • In regards to workflow: MUST be thoroughly vetted with all levels (especially physicians)
   • MUST be evaluated for workforce implications PRIOR to their launch.
   • Because guess what? Retrospective research shows Doctors weren’t just whining when EHRs were launched. Retrospectively, we were massively understaffed for the increased load burden that came

3. Insurers
   • MUST be eliminated payers requirements to perform and unnecessary document elements of care to justify billing codes BUT THAT DO NOT contribute to proper medical care
   • MUST develop a more efficient preapproval process for tests, medications, and procedures for patients
4. MOC requirements
   • MUST be better integrated with standard CME requirements, work to decrease burden and change the pay structure
   • (personally I would like to see MOC go altogether)

5. State licensing boards
   • MUST eliminate questions on licensing applications regarding diagnosis or treatment for mental health conditions
   • Consider a National Clearinghouse

6. National organizations (i.e., The National Institutes of Health)
   • MUST become involved and allocate funds to support research evaluating the implications of clinician well-being for the care delivery system and determining how to improve the work-life of health care professionals.

I have much more to this presentation (but this is getting long)!

If you haven’t seen this NAM Discussion Paper yet, I highly encourage you to check it out HERE: Burnout Among Health Care Professionals: A Call to Explore and Address This Underrecognized Threat to Safe, High-Quality Care. You can get this and more information. It was my go-to source for my talk.

So, all in all, friend, KEEP FIGHTING THE GOOD FIGHT! Awareness is starting to come forth that the burdens we have been shouldering are ungodly. Change is coming, and I am going to keep pushing.

If you help some help with what you are struggling with, book a free NO SLEAZE-NO SLIME-NO SELLING colleague-to-colleague call with me today HERE. Because sometimes it helps to have a colleague who understands!
Local Celebrations

Send us photos of your celebrations around the Evansville area!

VCMS Member Dr. Tim and Ann Almquist with their friends Dr. Paul and Julie Zeig at the home of Bill and Patty Spurling

Dr. Todd and Karen Wannemuehler, Dr. Ken and Diane Combs, Dr. Roger and Lisa Shinnerl, Dr. Chacko, and Melissa Jones at the WNIN Gala.

Dr. Roger and Lisa Shinnerl caught in the act of bidding at the WNIN Gala.
Should residency program directors look at applicants’ social media activity?  

Jan 9, 2019 | Doctor’s Voice, Skeptical Scalpel | 0 |

By now, I’m sure most of you probably have heard about the Cleveland Clinic first-year resident who was fired last September when it became known that in 2012 she had tweeted she would “purposely give all the yahood [Jews] the wrong meds...”

The website Canary Mission documented numerous tweets expressing similar thoughts. She has apologized but will likely have great difficulty finding another job as a physician.

This incident raises the question should residency program directors investigate prospective trainees’ social media activity before hiring them. I took an informal poll on Twitter and received 4512 responses in 24 hours. Here are the results:

Numerous replies, both against and for, were also received.

Some were worried that screening for social media activity would take too much time due to the large volume of applicants and the amount of material already requiring review. That objection could be countered by only examining the social media activity of candidates selected for ranking in the match.

Others were concerned about potential bias involving applicants’ political opinions, religious affiliations, or other activities. I believe most program directors and physicians in general are fair and would only be concerned with egregious cases.

A handful of people felt using the example of the resident from the Cleveland Clinic as a basis to review every applicants’ social media is wrong because she wrote the tweet about giving Jewish patients the wrong medication in 2012 when she was younger. But she would have been at least 20 years old then. Furthermore, Canary Mission listed more than 110 anti-Semitic tweets some of which were posted as recently as 2017 when she was still in medical school.

The situation highlighted the importance of educating medical students and residents about the use of social media. As one responder noted, medical students should assume program directors are googling them. Many employers are doing the same.

Here’s an illustration. My son was looking to hire someone to teach swimming to children. A young woman interviewed well. However when he googled her, the first post he found was one in which she said she hated kids. She did not get the job.

A few thought looking at applicants’ social media activity was reminiscent of the novel 1984. I pointed out that what is going on today seems different because the information has already been made public by the individual. There should be no expectation of privacy.

Despite disclaimers by those tweeting that their views do not represent the views of their institution, the public doesn’t necessarily accept that premise. What a trainee says on social media can reflect negatively on the program and the hospital.

To paraphrase a tweet by @ThePhoenixMD1, I’ll bet the Cleveland Clinic program director wishes they had looked a little harder at their applicants’ social media footprints before submitting the rank list.

Forget about the Twitter poll’s almost even split of votes. The reality is the posts are there for all to see.

Think before you post.

Skeptical Scalpel is a retired surgeon and was a surgical department chairman and residency program director for many years. He is board-certified in general surgery and a surgical sub-specialty and has re-certified in both several times. For the last 8 years, he has been blogging at SkepticalScalpel.blogspot.com and tweeting as @SkepticScalpel. His blog has had more than 3,000,000 page views, and he has over 18,000 followers on Twitter.
Wellness 360°
Vanderburgh County Medical Society
Better Health Through Balanced Living

“Testimonial”
“I first noticed the article in the Monitor about the coaching this Fall and was interested, so I contacted Talya, and we got together where she explained the program and answered all my questions. I gave it a try. I was able to identify my goals for the future, which included weight loss, regular exercise routine, and some lifestyle decisions. She arranged a month’s free trial at Tri-State Athletic Club with eight private training sessions. I worked with Robin who does an outstanding job leading you through a series of weight training exercise in 30 minutes with clear explanations of how to get the most benefit. Talya met with me for an hour every two weeks, and we discussed my progress making suggestions and keeping me focused. This was a very beneficial part of the program. I highly recommend giving it a try.”

– A testimonial from a Wellness 360 participant

The Program

The Wellness 360° program offers Vanderburgh County Medical Society physicians and medical professionals a confidential support system that provides whole-person care and helps to mitigate any stage of burnout. The Wellness 360° program provides a safe, supportive environment where physicians and medical professionals can receive the care they need and deserve.

Health Coaching

The Health & Wellness Coach will work together with participants to implement basic, gradual modifications based on the person’s unique needs towards a sustainable health and wellness transformation.

Confidential Counseling

The Psychologist and Social Worker will provide confidential counseling services to address the participants specific needs.

Colleague to Colleague

Local physicians who have experienced burnout, who are available for guidance and coaching or just there to listen.

Bob’s Gym Partnership

Bob’s Gym’s role in the Wellness 360° program will be to lead the exercise and accountability component. Each participant will be given a three week (6 appointments) with a personal trainer and full club privileges at any location. The personal trainers will create an individualized exercise regimen based on each participant’s needs.
Financial Wellness
Lifetime Financial Growth will offer a variety of strategies and products along with educational workshops to help you maximize your financial potential.

PRN: Physician Renewal Network
A support group for physicians.
This is a physician-led, confidential gathering for physicians who are looking for support, information, resources or those who may want to commiserate. See website for details on when meetings take place.

Additional Services Available to VCMS Members at a 15% Discounted Rate

Physician Burnout Coaching
The physician burnout coach is both a physician (not local) and an experienced executive coach. The coach will be your success partner who keeps you focused on your vision, support you, and create a plan of action together with you to reduce burnout. This service will be provided to VCMS members at a discount.
For more information please visit: https://www.thehappymd.com/physician-burnout-coach-team

Benefits of Wellness 360°
• Improved overall health
• Stress reduction and life balance
• Improved relationships professionally and personally
• Improved patient satisfaction
• Motivation to be well
• Physicians and medical professionals will be equipped to deal with the pitfalls of their profession
• Gained support system
• Financial Wellness

Schedule Your Appointment
To schedule an appointment, please call our Private Wellness 360° Line at (812) 475-9001.
The VCMS Wellness 360° program will not turn any physicians away. If you are a non-member seeking help, there is a fee schedule. Please contact the private Wellness 360° phone line or visit vcmsdocs.org/wellness-360-2/ for more information.

If you are experiencing suicidal thoughts, please contact the National Suicide Prevention Lifeline at 1-800-273-8255.
In the last issue, I gave you five of my favorite tips to help you in your efforts to eat nourishing whole foods. So after you have made the commitment to eat mostly whole foods, stocked your pantry and freezer, and made a list of a few quick and easy meals you can pull together anytime the need arises and made fruits and veggies the centerpiece of every snack and meal, what next? In this issue I’m going to share three more tips about planning and prepping for success.

Tip #6 – Planning your meals and snacks for the week is key to your success.
You might be ready to tune out here, because there are dozens, if not hundreds, of articles and services to help you become a better meal planner. They all sound amazing and if you use one of these plans or services your grocery budget, sanity, and health will all thank you. But I don’t use any of them either.

I’m honestly not the best meal planner out there. But that doesn’t mean I don’t plan at all. Planning ahead and being prepared for different contingencies is vital to your whole food eating efforts. My meal plan is typically just a rough list of options of the meals and dishes I want to make that week. My list is often only in my head or scribbled on a pad of paper (that I may or may not be able to find when I need it). When I’m really on the ball I make the list in Notes on my iPhone so I can look at it for a reminder at the grocery store, in the pick-up line at school or when I’m getting organized for my day.

Before my weekly grocery trip I think about our schedule for the week. Which evenings will we all be home to eat dinner together? What evenings will I need something quick and easy for the kids before they head off to sports and activities? What days will I have time to cook and what days do I need to rely on leftovers or something I can pull together really quickly?

Then I make a list of the things I want to make for the week (again often just in my head). My list is usually only 2-3 meals or dishes but they are almost always something that will provides leftovers for a second meal or that I can easily morph into a second (or third) meal for the remaining days of the week. On the days when I have time, I love to cook. But it’s also a really nice treat to have leftovers and know I don’t have to cook three meals a day. Every. Single. Day.

My shopping list is always in the Notes on my phone. It remains pretty constant—all of the fresh produce and staples we use every week for breakfasts, lunches, snacks and my quick and easy dinners (see Tip #3)—with just a few additions depending on the other 2-3 meals I plan to make for the week. (If you’d like a copy of my Healthy Shoppers Guide, you can sign up to receive it by email on my website.)

Tip #7 — Break your prep and cooking into smaller jobs and squeeze them in whenever and however fits your schedule.

Something like making homemade chicken or beef stock may seem like huge, overwhelming, time consuming project. But it really couldn’t be easier when you break it up and fit it into your existing schedule. When I roast chickens, I keep the bones in my freezer until I have a few extra minutes one evening after dinner. Throw them in a stockpot with water and some aromatics and let it simmer over night. Five minutes and done. In the morning, I stick the whole stockpot in the refrigerator. 1 minute or less. One afternoon or evening when I have a few minutes I strain the broth, put it in jars and put the jars in the freezer. 10 minutes max. It takes a little planning but almost no actual time.

Another example of this is my favorite quinoa salad that I like have on hand for a quick lunch or dinner. It feels like a lot of work by the time I cook the quinoa, make the dressing (an amazing tomato vinaigrette) and chop all of the vegetables. But it’s a lot more manageable if I break it up into smaller jobs. I make the dressing when I have time and put it in the fridge. When I’m cooking rice for dinner, I put on another pot
and cook the quinoa at the same time. It goes in the fridge too until I have time to actually make the salad. And then it doesn’t take much time to chop the veggies and put it all together and I have a yummy and nourishing side dish or meal for whenever I need it.

Clean and cut up veggies when you get home from the store so you always have a quick and easy snack or something ready to put in a lunchbox.

These are just examples. Think about the real food dishes or meals your family likes, and figure out ways to break up your prep and cooking time to fit it into the nooks and crannies of your schedule.

Tip #8 goes right along with planning ahead. When you cook, always, always, always make enough for multiple meals.

I almost always double or triple the recipe for anything I cook. Sometimes I can get an entire second dinner out of one meal. Other times the leftovers might be lunch for me and our 4 yr old all week. Or it might be a quick and easy thing to re-heat on nights with evening activities. Or I might just double or triple the most time intensive part of the meal (like slow cooker beans for taco night or our favorite homemade pasta sauce) and then freeze what’s left or re-purpose is for another meal.

A few years ago I read a book called An Everlasting Meal: Cooking with Economy and Grace. It’s a series of essays, part cookbook and part mediation on cooking and eating. For the author, cooking is more of an intuitive flowing art form than any specific dish or recipe. Her essays focus on feeding the people around her without any waste, “summoning meals from the humblest ingredients”, using every bit of an animal, fruit or vegetable and especially the belief that “the best meals rely on the ends of the meals that came before them.” I love this philosophy!

A couple of examples of how I might apply this philosophy:

This week I’m planning to make tacos and I always make a huge batch of black beans in the slow cooker. I usually have enough leftovers to put tacos or taco salad in school lunches the next day and for one other quick dinner on a night the kids have to eat early and get to soccer and ballet. Even after two dinners and lunches, I’ll still have plenty of beans left for another meal or two. If I don’t have time to use them, I’ll put them in the freezer to use another week. But most likely, another day this week I’ll make our version of Chipotle style burrito bowls, black bean wraps, or Mexican pizzas on brown rice tortillas toasted in the oven until they’re crispy. With the beans made, all 3 of these meals are options that I can pull together quickly and easily.

I also love to roast whole chickens, another very easy and popular meal at our house. I always roast 2 at a time and we usually get 2 complete meals out of the chickens, often with some left for lunches. Then I make stock with the bones (see Tip #7) and I’ll keep the stock and remaining scraps of meat in the refrigerator to make soup or risotto or freeze them to use later.

The more you cook, the more food you will have to work with and the more flexibility you will have in planning for the rest of the week. I know, I’m a genius, right? But it’s so true. I love having the start to a new meal (or two) already made and in the refrigerator. It makes the rest of the week so much smoother. And even when I don’t have a set meal plan, I never have to start fresh every single day thinking, “Oh man, what am I going to make for dinner tonight?” Once you get in the habit of cooking this way, it becomes so much easier and, over time, it just becomes a way of life.

Whether you are an expert meal planner with a complete weekly or monthly calendar of every meal and snack laid out in advance or more like me … making a rough weekly plan in your head, knowing you will almost certainly deviate from it … just make sure you have a plan! Focus on eating more fruits and vegetables. Figure out what works for your schedule and family and over time, with a little effort, a real whole food eating plan will become a natural, normal part of life. And your health will thank you!
THE POWER OF PARTNERSHIP

We are extremely pleased to announce a valuable new alliance with Lifetime Financial Growth, a member of the Guardian Network, for VCMS members. The alliance has been established specifically to meet an array of needs within the medical community.

LIFETIME FINANCIAL GROWTH WILL OFFER A VARIETY OF STRATEGIES & PRODUCTS ALONG WITH EDUCATIONAL WORKSHOPS TO HELP YOU MAXIMIZE YOUR FINANCIAL POTENTIAL.

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- Individual Disability Income Protection with Specialty Own Occupation
- Student Loan Protection
- Business Planning Strategies
- Life Insurance
- Estate Planning

UPCOMING EVENT:

*Estate Planning – Protecting Your Assets*
March 5th
First Federal Operations Center
6:00 pm

We welcome your input on workshop topics you would like to see in the future and to schedule an individual appointment to learn more about how LFG’s products and services can truly help you get your financial life in balance.

Get in touch with Julie Weyer

Julie Weyer
Financial Representative
(812) 550.8702
Julie_Weyer@lifetimefinancialgrowth.com
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“Hey, Tony! What’s the most important? Strength training, cardio, flexibility or nutrition?”

My answer? Yes. Those are the most important.

Think of your health like a car. Four wheels. If you only have 2 or 3 wheels, yes, the car may still move, but it is going to be a slow, rough ride. Put all four wheels on the car, and you have a much better chance of reaching your destination.

First things first. You need to know where you are going. What is your goal? I’m sure that you have heard the saying, “If you don’t know where you are going, any path will do.” If you don’t have a specific fitness goal and you just want to be healthier, then it doesn’t matter what you do. Do something active, on purpose at least four days a week. Do something more days than you don’t do something.

The trick comes when you have a more specific goal. Then you need a more specific plan. People have different goals and therefore need a little bit different plans, but let me share some basic things that I think can apply to everyone.

**NUTRITION**

Here’s the deal. We tend to make nutrition a lot more complicated than it has to be. I don’t give out meal plans; I teach principles and habits. There are two basic principles that I teach. 1) How much food you eat matters. 2) The kind of food you eat matters. How do you know what works best for you? The first and most important habit I teach is journaling. By keeping track of what you eat and evaluating to see if you are moving closer to or further away from your goal, you can make small adjustments until you determine what your body responds the best to, what fits your lifestyle, and ultimately what will help you reach your goal.

**STRENGTH TRAINING**

Pretty much everything in life is a little better if you are a little bit stronger. Carrying in groceries (or shopping bags) from the car is easier if you are stronger, and clothes generally fit better when you are a little stronger, energy levels throughout the day are usually higher if you are stronger. Most people will do fine with at least two days per week of strength training. Make sure you include some sort of squatting movement (bodyweight, kettlebell, barbell, lunge, leg press), hinging movement (deadlift variations, kettlebell swing, back extensions), pushing movement (pushups, bench press, overhead press), pulling movement (rows, chin-ups, lat pulldowns) and carry things around.

**FLEXIBILITY AND MOBILITY**

A great place to start is by stretching after each set when you strength train. Think about which muscle you just worked and then do a stretch or two for that muscle or muscle group. The next step is to do some type of yoga or pilates class. Having someone else tell you what to do and make sure you are doing it right helps a lot. There is also a lot of power in being part of a community focused on getting healthier together. Another thing that helps a lot with mobility is making sure that you are using good range of motion while you strength train.

**CARDIO**

What is the best thing for you to do for cardio? Run? Elliptical? Bike? The answer is simple. Whatever you hate the least. Whatever you will do consistently to elevate your heart rate and work up a sweat is best.

To sum it all up, they all matter. My recommendations: strength train at least twice per week. Do something to get your heart rate elevated and break a sweat at least four times per week. Make stretching a part of every workout. Pay attention to what you eat all the time. Not every day will be perfect, but pay attention to it. If you need help with specifics for your goals or have any questions, feel free to contact me at tonymaslan@bobsgym.com.
We have all heard the term “burnout” for doctors. Most studies suggest 50% or more of physicians are “distressed physicians.” This appears to be true whether you are at the beginning or end of your career, male or female. Are you frequently angry and frustrated because the system in which we work seems adversarial? Are you tired of spending your evenings catching up on EMR duties instead of spending time with your family? Have you forgotten why you chose this noble profession, especially when it seems that each patient you see is delaying the end of your workday? Are you depressed? If you think you are burned out or are concerned you may be headed that way; there is help available.

The VCMS is starting a support group for doctors who are previously, currently, and potentially burned out. This support group can be used “as needed” – PRN: Physician Renewal Network. This will be a physician-led informal, judgment-free, confidential gathering for anyone who has questions about burnout, those who are looking for support, information, resources, or those who may just want to come to complain and commiserate. All are welcome. We will meet on the first Wednesday of every month at the VCMS office (3116 E Morgan Ave # F) from 6 pm to 7 pm. Please join us.
THE VANDERBURGH COUNTY MEDICAL SOCIETY PRESENTS

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IN ASSOCIATION WITH LIFETIME FINANCIAL GROWTH

Join us for an intimate conversation and learn about the TOP FINANCIAL AND ESTATE PLANNING STRATEGIES for Physicians to implement now.

DATE & TIME:
Tuesday, March 5 at 6:00 pm (CST)

LOCATION:
First Federal Operations Center
4920 Davis Lant Drive | Evansville, IN 47715

KEYNOTE SPEAKER:
Jamie Traughber, JD*
Lifetime Financial Growth

During this presentation Jamie will discuss estate planning “must haves;” and strategies for protecting assets against creditors, as well as tax planning strategies.

LIMITED SEATING. Childcare available. Heavy appetizers and drinks will be served courtesy of Lifetime Financial Growth.

To reserve your spot please visit http://bit.ly/VCMS-EstatePlanning

Questions? Email: cpatterson@vcmsdocs.org or call (812) 475-9001

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9. We are making history. The VMA started in 1929. We have a rich history and we want you to be a part of our future.
8. Get involved. Jump on a VMA planning committee or become a board member.
7. Become a foodie. Check out a new restaurant every month. Come join our foodie group for lunch.
6. Make a difference. Throughout the year, we spearhead several volunteer and give-back events.
5. Support our future doctors. The VMA awards two annual scholarships to students at the IU School of Medicine- Evansville.
4. Enjoy a good book. Our book club meets monthly, come have a cup of coffee and join in the conversation.
3. Date night or Girlfriend time. We have several social events throughout the year. Get ready to fill up your calendar.
2. Help our local non-profits. Join us as we award thousands in grant money to many amazing organizations.
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If you would like your recent family vacation photo (non-scenic) in future Monitor Publications, please email cpatterson@vcmsdocs.org.

Above: Dr. Randy Lance, Heidi, Caitlin, & Hailey at Disney Animal Kingdom in front of Everest

Below: Dr. Santi and Marti Vibul at Lake Louise in Canada

Above: Dr. Chris Chacko and his mother in Monaghan, Ireland at Castle Leslie

Below: Dr. Tim & Ann Almquist with their family at French Lick, Indiana
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### Calendar of Events

#### Save The Dates

<table>
<thead>
<tr>
<th>Month</th>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>MARCH</td>
<td>March 5th</td>
<td>Protecting Your Assets&lt;br&gt;First Federal Operations Building • 6:00 pm</td>
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<tr>
<td>MARCH</td>
<td>March 12th</td>
<td>VCMS Executive Board Meeting&lt;br&gt;VCMS Offices • 6:00 pm</td>
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<tr>
<td>MAY</td>
<td>May 6th</td>
<td>VCMS Golf Scramble&lt;br&gt;Victoria National Golf Course • 11:00 am</td>
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<td>MAY</td>
<td>May 8th</td>
<td>Financial Workshop&lt;br&gt;Location and Time TBD</td>
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<tr>
<td>MAY</td>
<td>May 14th</td>
<td>VCMS Executive Board Meeting&lt;br&gt;VCMS Offices • 6:00 pm</td>
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More exciting events to come!

Stay updated on future events and visit the VCMS website at [http://vcmsdocs.org/events/](http://vcmsdocs.org/events/)
### February Birthdays

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Arthur Bentsen, MD</td>
<td>2/01</td>
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<tr>
<td>Zhenglong Wang, MD</td>
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<tr>
<td>Gregory K. Hindahl, MD</td>
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<td>Richard A. Riedford, MD</td>
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<td>David A. Koehler, Jr., MD</td>
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<td>Richard M. Sandefur, Jr., MD</td>
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<tr>
<td>Mahendra R. Sanapati, MD</td>
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<td>Lisle Wayne II, MD</td>
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<td>Ross Whitacre, MD</td>
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<tr>
<td>Elizabeth M. Mann, DO</td>
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<td>Thomas A. Brummer, MD</td>
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<td>Jason T. Samuel, MD</td>
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<tr>
<td>Joshua M. Aaron, MD</td>
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<tr>
<td>Bruce A. Adye, MD</td>
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<td>Michael B. Boyd, DO</td>
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<tr>
<td>Alejandro G. Pontaeo, MD</td>
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<td>Marshall G. Howell, III, MD</td>
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<td>Henry B. Kaplan, DO</td>
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<td>Kelly L. Kling-Tipton, MD</td>
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<td>Andrea L. Jester, MD</td>
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<td>Randy A. Lance, MD</td>
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<td>Heather L. Schroeder, MD</td>
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<td>Heidi M. Dunninway, MD</td>
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<td>Larry W. Sims, MD</td>
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<td>Geoffrey M. Geoghegan, MD</td>
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<td>Lawrence A. Judy, MD</td>
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### March Birthdays

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<td>Chong S. Kim, MD</td>
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<td>Robert H. Oswald, MD</td>
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<tr>
<td>Richard P. Sloan, MD</td>
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<td>Keith A. Phillips, MD</td>
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<td>Dan Vardi, MD</td>
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<td>Roderick L. Warren, MD</td>
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<td>Donald M. Bailey, MD</td>
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<td>Harry L. Hunter, MD</td>
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<td>Robert J. McElroy, MD</td>
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<td>Jane Dy Lim, MD</td>
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<td>Alan T. Marty, MD</td>
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<td>Kenneth L. Nachtnebel, MD</td>
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<td>Donald E. Patterson, MD</td>
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<td>Stanley P. Taraska, MD</td>
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<td>Henry W. Bockelman, MD</td>
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<td>Charlotte E. Orr, MD</td>
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<td>Caitlin M. Schultheis, MD</td>
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<tr>
<td>Amanda E. Bohleber, MD</td>
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<td>Brenda A. Troyer, MD</td>
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