



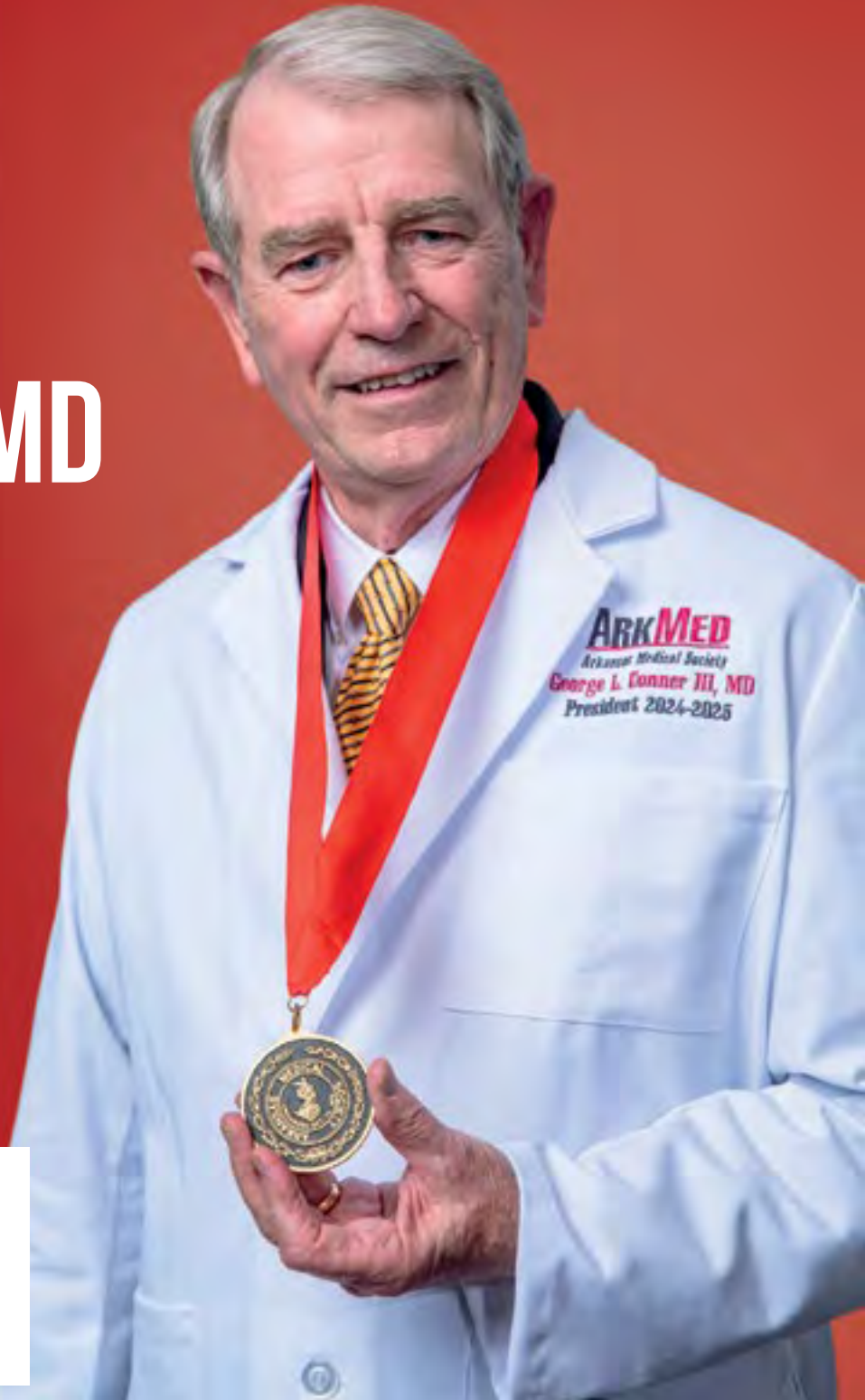
JOURNAL

OF THE ARKANSAS MEDICAL SOCIETY

SUMMER 2024 VOLUME 121 NUMBER 1

GEORGE L. CONNER III, MD

AMS PRESIDENT 2024-25



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Arkansas Medical Society
 10 Corporate Hill Dr., Ste. 300, Little Rock, AR 72205
 501-224-8967
 ams@arkmed.org
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As the newly appointed President of the Arkansas Medical Society, I am deeply honored to lead this esteemed organization. It is with great pride that I accept this responsibility, recognizing the profound impact AMS has had on our medical community and the health of our state. Together, we can continue to advance the quality of healthcare in our state to ensure that every Arkansan receives excellent medical care. ■



GEORGE L. CONNER III, MD
2024-25 AMS PRESIDENT

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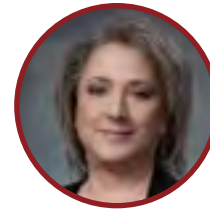
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MORE WORK NEEDED ON GOLD CARD

DAVID WROTEN
AMS EXECUTIVE VICE PRESIDENT

SIX MONTHS INTO THE LANDMARK “GOLD CARD” LEGISLATION PASSED DURING THE 2023 ARKANSAS GENERAL ASSEMBLY, AND WE CAN SAFELY STATE THAT MORE WORK IS GOING TO BE NEEDED TO ACHIEVE THE GOALS. ACT 575 PROVIDES EXEMPTIONS FROM PRIOR AUTHORIZATION (PA) REQUIREMENTS FOR PHYSICIANS WHO ACHIEVE A 90% APPROVAL RATE FOR PAST PA REQUESTS. IT WENT INTO EFFECT FOR MOST COMMERCIAL HEALTH PLANS ON JANUARY 1, 2024.

The look-back period for this year was January -June of 2022. Carriers were to review claims for that period and determine which physicians met the 90% rule for most services subject to PA requirements. During the first six months of 2024, those carriers are required to conduct a retrospective review of claims to determine whether to continue the exemptions.

A lot did not go as envisioned by AMS or the legislators who sponsored the bill. First, the state’s largest carrier was hampered by the fact that the initial 2022 look-back period was during the dog days of COVID. Most PA requirements had been waived during the pandemic, making such review nearly impossible. They responded by waiving most PA requirements for 2024. However, that has led to a significant increase in pre-payment reviews. AMS has received numerous complaints about delays in payment because of this.

As for the other carriers, not much has been forthcoming about how they are complying with the Act. There is a lot we do not know, and it highlights changes that will need to be made when the General Assembly convenes next January. Certainly, there must be more transparency. Every physician should be informed by the carrier which medical services have met the 90% rule and for those that did not meet the threshold,

what was the PA approval rate? There should be some level of reporting to the Arkansas Insurance Department, such as how many medical services are subject to PA requirements; how many physicians achieved gold card status for how many separate services.

There also needs to be some provision that limits a carrier’s ability to use the gold card legislation as an excuse to delay payment with endless requests for medical records. What good is an exemption from PA requirements, which was intended to reduce delays in treatment for those physicians with a 90% approval rate, if you have no idea if you will get paid for your services.

By October of this year, carriers are required to evaluate the first six months of claims using a retrospective review process to determine whether to grant or deny an exemption for each particular healthcare service that requires a PA. The carrier is then required to submit to each healthcare provider (a) the total number of payable claims submitted by that provider, (b) the total number of denied and approved prior authorizations, and (c) provide a notice to each healthcare provider that either grants or denies a prior authorization exemption to the provider for each particular healthcare service. The exemptions are valid for at least 12 months.

As with any new effort to legislatively tackle the hurdles that face physicians in their efforts to provide prompt, efficient care for their patients, the gold card will continue to be a work in progress. Feedback from AMS members and clinic managers would be extremely helpful in directing our attention to making this novel legislation work as the AMS and the bill sponsors intended. ■

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CASEY L. PENN

GEOURGE L. CONNER III, MD, HAS SPENT A CAREER AT THE “GRASS ROOTS LEVEL” OF MEDICINE. HE HAS BEEN A SOLO FAMILY PRACTITIONER SINCE 1993 AT FORREST CITY FAMILY PRACTICE CLINIC, NOT FAR FROM HIS HOMETOWN OF MEMPHIS, TENNESSEE. ON FRIDAY, MAY 18, DR. CONNER WAS SWORN IN AS THE 2024-25 PRESIDENT OF THE ARKANSAS MEDICAL SOCIETY. ACTIVE SINCE 1987, HE HAS SERVED ON THE BOARD OF TRUSTEES AND LATER THE EXECUTIVE COMMITTEE AS SECRETARY, VICE PRESIDENT, AND PRESIDENT-ELECT.

Early in his life, Dr. Conner found himself being drawn to medicine. His father was an electrical engineer, and his mother was a schoolteacher and then homemaker to he and his sisters. Despite not having physicians in his immediate family to steer him toward the medical field, he and those around him seemed to know that’s where he was headed. “I grew up feeling that God created me to be a physician,” he explained. “I always loved reading about medical science, and when someone was injured, I tended to them. I remember my grandmother – and she wasn’t the only one – saying to me, ‘When you’re older and you’re a doctor ...’”

In addition to his family’s encouragement, Dr. Conner recalls teachers whose support of his chosen path gave him courage to persevere. His family doctor was a positive influence as well. “When he learned I wanted to be a doctor, he shared great wisdom about listening to the patient,” he recalled. “He advised me to be fast between the patient rooms and slow with the patients.”

FROM DESIRE TO FRUITION

As a young adult, Dr. Conner saw his childhood inclination develop, with nontraditional twists and turns along the way. After graduating from Wooddale High in Memphis, he earned a B.S. in Vertebrate Zoology from Memphis State University. Like many young college students, he initially doubted his abilities. “I wanted to be a physician,” he recalled, “but I worked on a master’s degree in another subject because I thought I wasn’t intellectually prepared for medicine.”

In time, he found he was prepared, and after a few more challenges, entered medical school ... but not where you might expect. “My background is different in that I attended my first two years of medical school in Guadalajara, Mexico,” he explained. “It was a God thing. At the time, I had applied to the University of Tennessee Health Sciences Center, and they told me to get my master’s and reapply. With that, I didn’t think that I would get in. But I met a resident, I believe by the Lord’s providence,

who had gone to the autonomous University of Guadalajara. He told me they would allow me to transfer to the University of Tennessee after my second year if I did well on the boards. During that time, Tennessee usually had openings in the third year. So, in faith, my wife and I went to Mexico.”

Dr. Conner never regretted his decision, and after studying hard and doing well on his boards, he came back and indeed graduated from the University of Tennessee. After three years of residency in Gadsden, Alabama, the young doctor then made his way back home ... or at least close to it.

“I’m a native Tennessean,” he said. “I suspect that’s one reason I came to Forrest City – to be close to family – but it wasn’t the main reason. As I came into practice, I didn’t care to go to a place with an abundance of doctors, and I knew this town needed a physician. We went into practice here with a group for the first five years, and then I went out on my own. My wife Brenda has always been supportive of me, and she is also my office manager. I can securely say I would not have made it without her and without the grace of God. We have one son, Luke, and we’re so thankful for him.

“I’m just a rural doctor,” he said humbly, this man who has cared for patients and their families in the Forrest City community for 37 years. For 20 of those 37 years, he even delivered babies – something he enjoyed but stopped once his own son became a teenager. “I have a busy practice. It’s so nice to care for the different family members and see how they interact with each other. I love family practice, and I don’t think anyone could have a better, more supportive staff than I do.”

Jeri Cooper, LPN, has worked for Dr. Conner for 17 years and says it’s easy to support him. “Dr. Conner is the best boss to work for,” she said. “He takes care of his patients with kindness and love and strives to be the best!”

Brenda Conner characterizes her husband – and boss – as loving, compassionate, supportive, and servant minded. “Dr. Conner is the same person at home as he is in the office. I know, because I’ve been married to him for 48 years, and I’ve worked in the office for the past 13,” she said. “He genuinely cares for his patients and staff, which is why he is still working past retirement age.”

Patients have also shown their love for Dr. Conner, his wife also shared, “Two patients nominated him for the Fay Boozman Award in 2013, telling the committee why he was such a great doctor. He won the award, and we kept it from him until the night he received it, surrounded by family and friends! He was taken aback by that, but it was well-deserved!” (In honor of the late Dr. Fay Boozman, the Arkansas Physician Resource Council bestows the award to a physician who lives out his or her Christian faith in their lives and work.)

A HEART FOR RURAL PRACTICE

If Dr. Conner feels any burdens about family medicine, it is the need to see more physicians practicing in a rural environment. “Physicians are so important to the people of Arkansas,” he explained. “I’m not knocking nurse practitioners. They have a place in medicine. I’ve employed two and I’d like to find another, but medical care would advance if there were more trained physicians that were able to practice in a rural environment.”

As he instructs students from the University of Tennessee who come through his clinic on rotations, he stresses the importance of serving the rural community. However, he understands that it’s a tough sell. “With medical students, what I see is the majority want to practice in a place where they work a set number of hours and don’t take much call,” he said. “That’s not possible in a rural environment because there aren’t enough physicians. I understand students’ attraction to the city; it offers more choices of schools, lifestyle, entertainment ... and right now, you can make more in the city than you can in the rural community.”

Being a rural doctor takes a different kind of person, he indicated. “You won’t have a lot of people around you to back you up. You’re out there on your own, so you need confidence that you can manage diverse, serious problems, at least enough to get patients through the door and on to someone else. That is the challenge.”

TAKING HIS TURN AS A PATIENT

In 2022, at age 70, Dr. Conner was diagnosed with an aggressive strain of lymphoma and underwent close to six months of chemotherapy. “It was my first serious illness,” said the doctor, who until then had never spent a night in the hospital.

According to Dr. Conner, his cancer changed his practice for a while and increased his understanding of the patient side of medicine. “Being ill, and in the hospital is not fun. But the Lord took me through it and kept me going,” he said. “I hired a nurse practitioner and then another and I had another physician helping me. They covered the practice when I couldn’t be there, so I had help.” Now cancer-free, Dr. Conner has slowly made his way back to full-time, solo practice.

PRESIDENTIAL EMPHASIS

As AMS President, Dr. Conner wants to support the continued work of the Society, especially in the areas of obesity and legislative advocacy. “Helping people conquer their obesity is the objective as is having it recognized as a disease,” he said. “That’s coming about through Dr. Johnson’s initiative, so I want to see us continue with that.”

Speaking of legislative efforts, Dr. Conner noted how AMS has always worked to ensure that Arkansas legislation is beneficial to patients and good for physicians. “AMS has always been about allowing physicians to take good care of patients without unnecessary regulations,” he said. “I appreciate that, and I don’t mind spending time encouraging other physicians to join. It’s essential for physicians to be involved. Our legislators don’t always understand how a bill may impact physicians and

patients. Our role is to help them understand, and that's good work."

FROM HIS COLLEAGUES

"Dr. George Conner is one of the finest people I have ever known, which is a common feeling among people who know him," said James DeRossitt, MD, of his friend and colleague. A retired obstetrician in the Forrest City area, Dr. DeRossitt often worked with Dr. Conner at Forrest City Medical Center and described him as a kind, caring, highly skilled family practitioner and an excellent role model. "He knows his patients well. More than just knowing their diagnosis, he understands them, their families, and their social situation. He is approachable, with an upbeat personality that makes those around him feel comfortable.

"In this age of specialized medicine, he is a generalist with a wide range of clinical abilities. He is old school with respect to knowing his patients but up to date with

his medical skills. He makes appropriate referrals when indicated, but as a trained and skilled family practitioner, he can take care of most of his patients' problems."

Candace Shafer Franks, MD, knows Dr. Conner through her work as a hospitalist at Forrest City Medical Center. In addition to being a colleague, Dr. Franks helped treat Dr. Conner during his hospitalization for pneumonia, a secondary illness suffered during his battle with cancer. He credited her with "saving his life" during that time by seeing his lack of recovery and pushing him to get checked out further. Dr. Franks called it a privilege to work with Dr. Conner for the past 17 years and praised him for his decades of providing comprehensive medical care in his community. "Dr. Conner is respected and loved, and with good reason. He is compassionate, concerned, consistently accessible, and conscientious regarding his practice of the art of medicine. He is considered both family and friend

by his patients. His leadership and influence extend far beyond his role as a physician, including active participation in community outreach and his church."

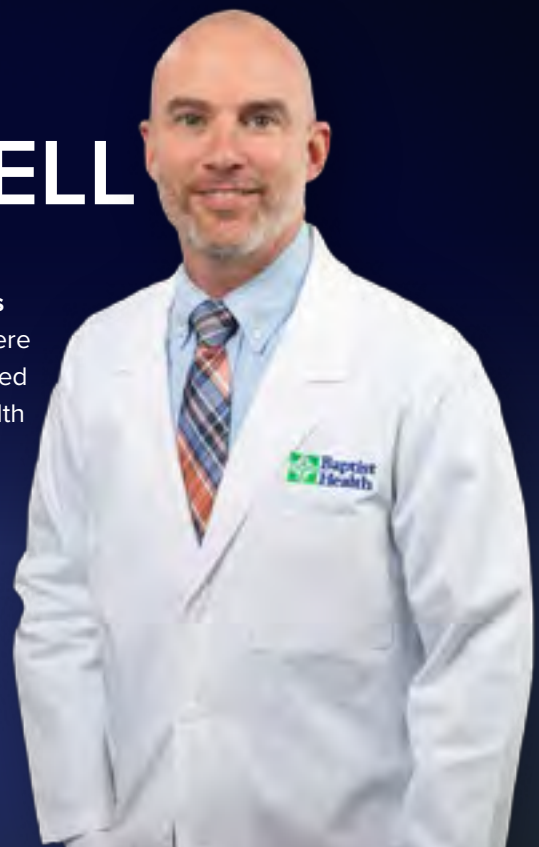
With respect to his friend's post as AMS president, Dr. DeRossitt added, "He will be an excellent representative of the state's physicians as he serves. He has assisted in the training of medical and nursing students his entire career and has worked diligently on behalf of physicians in our area and in the state. His colleagues and friends are so proud that his lifetime of service is being recognized."

As AMS president, Dr. Conner feels blessed to have supportive colleagues and to be of service. Of his continued service to his patients, he said, "Family medicine is truly a joy, and it's a lot of fun," he said. "As a friend once told me, comparing it to flying a plane, 'It's hours and hours of bliss and moments of terror.'" ■

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INAUGURAL STUDENT AND FACULTY AWARDS AND POSTER COMPETITION

2024 PRESIDENTIAL GALA

CASEY L. PENN

At this year’s presidential gala, there was much to celebrate! In addition to honoring the Society’s 2024-25 president, George L. Conner III, MD (see cover story, page 8), members recognized the high achievements of medical students, residents, fellows, and faculty through the AMS Student Awards as well as through a student and faculty poster competition.

Naveen Patil, MD, MHSA, MA, FACP, FIDSA and Prasad Padala, MD, MS, FACHE facilitated the awards and the poster competition. As an introduction to the awards ceremony, Dr. Patil thanked those who nominated candidates for the awards as well as the presenters and Dr. Padala, who chaired the poster competition. “As we head into the 150th year, we at the Medical Society want to focus on the next generation of health care professionals and hence decided to

recognize medical students, residents, fellows who are the future of the Arkansas Medical Society,” he said. “With this in mind, we instituted the awards to recognize the contribution and talent in this group of students and trainees. Along with that we instilled a poster competition, and I know you’ve seen the posters displayed by our enthusiastic students, residents, and faculty.

“We also recognized faculty who train these young minds and keeping that in mind we instituted awards for excellence. We used a wholistic approach where a candidate is evaluated based on their work in their respective setting. Every program is different. I hope all of you are here can go back and spread this message to your peers so that we can have more applications in the future.”

The inaugural awards were as follows:

BEST MEDICAL STUDENT AWARDS

UAMS: Evan Hicks, Darynne Dahlem, Duru Erkan, Sanjana Padala

NYIT: Andrew Sullivan, Monique Westley, Morgan Terrell, Nicholas Knott

ARCOM: Alley Marker, Autumn Kennedy, Chase Bowman, Gabrielle Lutt, Imran Khan

BEST RESIDENT AWARDS

Internal Medicine: Kirolos Gabrah, SBMC; Mallory Bagwell, CRMC; Mason Harper, UAMS; Mohammad Khrais, UAMS; Zachary Peden, NEA Baptist; John Read, ARCOM

Family Medicine: Alexis House, UAMS Texarkana; Amrutha Denduluri, UAMS Little Rock; Hamilton Newhart, Baptist North Little Rock; Michael Page, UAMS Fort Smith

Other Specialties: George Vilanilam (UAMS), Diagnostic Radiology; Heta Ladumor (UAMS), Diagnostic Radiology; Khushboo Verma (UAMS), Neurology; Lane Gay (Emer Med, Unity Health); Shubham Biyani (UAMS), Neurology; Suzanne Abou-Diab (UAMS)

UAMS Residents: Anam Kesaria, Radiation Oncology; Celeste Gibson, Ear Nose & Throat; Ashley Elser, Anesthesia; Collette Tilly, Medicine-Pediatrics; Mitchell Silano, Orthopedics; Abdelrahman Elhusseiny, Ophthalmology; Jared Gowen, Vascular Surgery; Joshua HekmatJah, Dermatology; Kristina Kennedy, Psychiatry; Lauren Johnson, Surgery

UAMS Best Fellows: Andrew Tran, Pediatric Hematology Oncology and Clinical Informatics; Elizabeth Hanson, Pulmonary Critical Care; Haylie Reed, Vascular Surgery; Julie Windholz, Geriatrics; Venkatram Krishnan, Pediatric Radiology



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POSTER WINNERS

Medical Students: Grace Guzman, Marie Fong, Megan Rogers, Rebecca Jones, Sajana Padala

Residents & Fellows: Drs. Andrew Curley, Giridhar Dasegowda, Sai Nikhila Ghanta, Vivian Richards, Andrew Tran

Faculty: Chris Smith, MD; Jane Kang, MD

Academic Excellence, Faculty: Adam Wolfe, Assistant Professor of Radiation Oncology (UAMS); Monica Rojas (ARCOM), International Health; Humaira Khan, Assistant Professor, PD, Neurology (UAMS); Joana Mack, Associate Professor, Pediatric Hematology-Oncology (ACH / UAMS); Stephen Foster, Assistant Professor of Family Medicine (UAMS Northeast, SBMC); Stan Keller, Internal Medicine / Pulmonary CCM (Baptist Health DIO); Tony Slieman, Associate Professor.

In addition, AMS presented a Special Recognition Award to Naveen Patil, MD. In recognizing Dr. Patil, David Wroten read the description of the award, “Success depends on visualizing the end result, planning to achieve that result, and doing the hard and often difficult work to make it happen. Our deepest appreciation to Dr. Naveen Patil for his vision, leadership, and dedication to growing a stronger and more inclusive Arkansas Medical Society.”

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AUTUMN KENNEDY

2024 AWARD WINNER

CASEY L. PENN



AUTUMN KENNEDY'S JOURNEY TO BECOMING A PHYSICIAN BEGAN ONE SUMMER WHEN HER MOTHER UNDERWENT AN INTENSIVE SURGERY. "CARING FOR HER TAUGHT ME THAT TENDING TO OTHERS INVOLVES BOTH MEDICAL KNOWLEDGE AND EMOTIONAL SUPPORT," SAID KENNEDY OF THE EXPERIENCE. "THIS MADE ME REALIZE THE IMPORTANCE OF BEING PRESENT AND UNDERSTANDING, EVEN WHEN I COULDN'T HEAL HER BODY."

Once awakened to her burden to help the suffering, Kennedy began to act on more opportunities to help others in a tangible way. In high school, she donated blood regularly. On a mission trip to Peru, she helped residents clean the streets – an awakening to the impact of environmental health. "Knowing I was helping led me to ask myself, 'What if I could learn more? What else could I offer?'" she said. "It reinforced my belief that medicine involves personal sacrifice and a passion for learning, just like my experience with my mother."

Now a first-year student at the Arkansas College of Osteopathic Medicine, Kennedy looks forward to the opportunity to contribute directly to healthcare. As she shadows physicians, she keeps an open mind about specialties she might pursue. "I'm eager to discover which areas I develop a passion for," she noted. "However, I do have an interest in dermatology. Also, observing a primary care provider at SALT Health redefined my view of medicine. Each patient's unique needs and motivations showed me how health is a combination of lifestyle and environment. Medicine is treating the whole person, not just symptoms."

"I know medicine is right for me because it combines my enthusiasm for learning with my compassion for others. I am eager to move from a supportive role to being directly involved in partnering with patients to maximize their health."

While she's in school, Kennedy is learning to rely on family and friends for emotional support. "Medical school feels like a team sport," she explained. "Without my support

system, I would crumble. I'm thankful to have my people in my corner, especially my hero, my mother. If there is an attribute of medicine that she demonstrates, it is altruism. Growing up, she put the needs of our family above her own, despite her exhaustion. Now that I'm in medical school, she continues to add tasks to her own plate to allow me more time to focus on my studies. Both my parents have made sacrifices to allow me to pursue my dreams. Once established in my career, my first goal is to gift my parents a well-deserved vacation as a token of my gratitude."

In addition to the support of family and friends, Kennedy appreciates the support of the Society. A new member in 2024, she has already found immense value in the organization. "One aspect that has pleasantly surprised me is the support from the administration. I've found them enthusiastic about helping me engage my peers and overcome any barriers to participation. For example, they are providing resources and clarification on how we might work together to develop new AMS chapters."

It helps that AMS waives student membership fees – a significant gesture that Kennedy believes removes a barrier for students laden with accumulating debt, thereby allowing them to reap the benefits

offered through the organization. "AMS offers valuable networking and professional development opportunities for students," she said. "AMS events and conferences allow students to present their research, engage with residents, and enhance their skills as they pursue their medical careers."

Finally, AMS is an advocate for the health and wellbeing of Arkansas patients and physicians, and that's a cause that aligns with Kennedy's philosophy as both a future physician and native Arkansan. "As I progress in my medical career, I aspire to play a pivotal role in shaping the future of healthcare in Arkansas, and I believe that my membership in AMS will be instrumental in achieving this goal."

What was your favorite part of the AMS Presidential Gala?

"I think what I enjoyed most about the event was getting to network and see more about what the AMS stands for."

Do you plan to attend next year in celebration of 150 years of the Arkansas Medical Society?

"I would love to attend if I am able!"





GABRIELLE LUTT

2024 AWARD WINNER

CASEY L. PENN

ORIGINALLY FROM WAYNE, NEBRASKA, MEDICAL STUDENT GABRIELLE LUTT HAS ENJOYED BEING IN ARKANSAS. AS SHE DROVE ONTO THE CAMPUS OF THE ARKANSAS COLLEGE OF OSTEOPATHIC MEDICINE (ARCOM), SHE KNEW SHE WAS IN THE RIGHT PLACE. "I FELL IN LOVE WITH THE AREA WHERE THE SCHOOL SITS," SHE SAID. "I ALSO APPRECIATED THE STRONG COMMUNITY INVOLVEMENT AND SUPPORT OF THE SCHOOL. I LOOK FORWARD TO BEING PART OF THIS NEWER SCHOOL'S CONTINUED GROWTH AND ACHIEVEMENTS."

What is the value of AMS membership to you as a student?

AMS is an opportunity to showcase my research and network with other medical students and physicians at various events.

What was your favorite part about this year's AMS Annual Meeting?

My favorite thing was the opportunity to view the different research posters and attend the gala.

Do you have a specialty you're working toward?

Anesthesia

What is leading you to enter the field of medicine?

I have always been passionate about healthcare. Through experiences such as hospital volunteering and CNA work, I realized medicine specifically provides me with the opportunity to use my leadership skills, make a difference in my community, and provide care to people in the best and worst times of their life.

What do you look forward to about practicing medicine?

I'm excited to be on the forefront of medical advancements to come, and I look forward to the ability to care for patients at all stages of life. I hope to impact each patient positively. Also, I have an interest in medical education and hope to use all that I learn as a clinician to help guide the next generation of medical students.

What is the best advice you've received related to medicine?

Regardless of where you see your career in medicine going, learn from EVERY experience you have while on rotations or in other academic settings. Each experience you have will help you provide the best patient care and help you remain knowledgeable about multiple sectors of medicine. ■

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MICHAEL PAGE, DO

2024 AWARD WINNER
CASEY L. PENN



MICHAEL PAGE, DO, IS AN AMS RESIDENT PHYSICIAN WHO RECENTLY WAS PRESENTED AN AWARD AT OUR ANNUAL MEMBERSHIP MEETING. DR. PAGE ENJOYS INTERACTING WITH PATIENTS AND FELLOW PHYSICIANS – THINGS THAT GO HAND IN HAND WITH HIS DECISION TO PRACTICE FAMILY MEDICINE. “I ENJOY THE PEOPLE THE MOST,” HE EXPLAINED OF HIS RECENT WORK AS A RESIDENT PHYSICIAN AT UAMS WEST REGIONAL CAMPUS IN FORT SMITH. HAVING JUST COMPLETED HIS RESIDENCY IN FORT SMITH, DR. PAGE WILL TRANSITION INTO FAMILY MEDICINE AT UAMS SOUTH REGIONAL CAMPUS IN HIS HOMETOWN OF MAGNOLIA. THERE, HE WILL SERVE AS ASSISTANT PROFESSOR OF PREVENTATIVE AND FAMILY MEDICINE. “WHETHER IT IS MY PATIENTS, COLLEAGUES, OR OTHER HEALTH CARE PROFESSIONALS, MY DAILY INTERACTIONS BRING MEANING AND PURPOSE TO A JOB I LOVE. I MEET PATIENTS ACROSS EVERY ASPECT OF AGES, GENDERS, AND BACKGROUNDS, ALL WITH DIFFERING NEEDS. I FIND THE STORIES AND UNIQUE PERSPECTIVES BEHIND EVERY DOOR TO BE THE BEST PART OF MY DAY.”

He has a patient to thank for helping him decide to go back home. “I’ve been fortunate to have amazing mentors throughout my education and training in medicine,” explained Dr. Page. “However, the best professional advice came a few months ago from a patient of mine. In the middle of our visit, he said, ‘Dr. Page, you’ll never be a part of anything greater than family.’

“At the time, I was in the middle of deciding on a career path, with several job opportunities to consider. One of these opportunities was to return home to Magnolia and join the faculty of UAMS South. It has always been in my heart to return home, and with that advice, I knew that was the path for me. I look forward to being closer to my family and taking care of the community that provided me with a great childhood. I’ve read that ‘family is the place where you can be your most complete self.’ Although I have been away for over ten years pursuing my education, Southwest Arkansas has always been that place for me.”

The UAMS West Family Medicine Residency Program has been a perfect fit for this physician’s training in full-scope family medicine. Calling the program “one of the best places in the country to learn family medicine,” Dr. Page praised its broad scope and credited it with providing him invaluable opportunities to train in inpatient, outpatient, obstetrical, emergency, rural, and pediatric medicine. “I’ve always thought of a family doctor as

doing a little of everything for everyone. In addition, we are one big family and training with the residents and faculty at UAMS West has made me a better doctor. I feel well prepared to enter practice as an attending physician.”

As he embarks on his future, Dr. Page hopes to make a meaningful contribution to healthcare in Arkansas. “I believe starting with UAMS South in Magnolia is the best place to do that. I hope to expand the clinic’s patient population, in hopes of training residents at the program in the future. If through that endeavor, a few decide to stay in Southwest Arkansas and practice medicine, it will be an unimaginable experience for me. The community there is representative of hundreds of rural towns across Arkansas in need of physicians.”

To young people considering a career in medicine, he recommends taking time to reflect ... on where they’ve been and where they want to go. “As opposed to a career, medicine is often a calling,” he reflected. “If you find that desire to become a physician inside you, it is probably with great purpose. For me, every challenging moment has been well worth the opportunity I now have to practice medicine every day.”

Dr. Page encourages all physicians and medical students to be active members in the Society. “Membership has been important to me personally and professionally,” said Dr. Page,

who learned of the Society’s advocacy work while he was in medical school. “I was able to engage in the legislative process at the state capital, and I was inspired by the united voice of physicians in Arkansas and encouraged to stay engaged in the process.”

Having recently attending this year’s AMS annual meeting and presidential gala, he expressed his gratitude for opportunities to network with fellow Arkansas physicians, “Their ideas, stories, and passion for healthcare in Arkansas continue to inspire me to remain an active member of AMS and take part in improving healthcare in our state.”

What keeps you motivated in your work as a physician?

Family and friends – in particular, my parents, Jimmy & Kathy Page – who remain the two people in my life I seek to make the proudest.

What do you like to do on your days off or weekends?

Growing up in Southwest Arkansas, I’ve always loved to hunt, fish, and be outdoors. I’m also continuing to learn amateur beekeeping from my grandfather, who at 96, still has active hives back home in Magnolia. I look forward to spending more time with him in the months to come. Lastly, I’ve picked up woodworking and refinishing vintage furniture. I enjoy taking the old and repurposing or revitalizing it into something people find desirable again. ■

NICHOLAS KNOTT

2024 AWARD WINNER

CASEY L. PENN



MEDICINE HAS LONG BEEN AN INFLUENTIAL PART OF LIFE FOR NICHOLAS KNOTT, A THIRD-YEAR STUDENT AT NYIT COLLEGE OF OSTEOPATHIC MEDICINE AT ARKANSAS STATE UNIVERSITY AND A 2ND LIEUTENANT IN THE U.S. AIR FORCE. HE WATCHED AS HIS MOTHER, NOW AN ESTABLISHED CARDIAC NURSE, PUT HERSELF THROUGH NURSING SCHOOL WHILE RAISING HIM AND HIS SISTER. HIS GRANDMOTHER WORKED AS A NURSE ALSO, AND HIS STEPMOTHER WAS A TECHNICIAN FOR AN OPHTHALMOLOGIST.

In contrast, Knott's father is a commercial painter and handyman. "He always wanted me to pursue a career that was more forgiving to mind and body," said Knott, who decided to enter the field of medicine while applying for college. Since making that decision, his appreciation for medicine has only deepened and he hopes to be a physician that his patients and colleagues can trust to provide the best care possible in any situation. "One of the worst things a patient or family member can hear is 'I don't know what else to do.' If I can't provide direct care to the patient, I hope to at least point them in the right direction. There is always a way to help."

Born and raised in Dearborn, Michigan, Knott finished high school and then made a substantial move to Phoenix, Ariz., to attend Arizona State University. At 25, he moved again to Jonesboro, Ark., to start medical school.

During his undergraduate, Knott studied biochemistry. "Ultimately, I knew I wanted to be in medicine, but first, I wanted to experience life as an environmental researcher. For two years, I worked under Dr. Everett Shock and the Group Exploring Organic Processes in Geobiochemistry (GEOPIG). We analyzed hot springs, geysers, and underwater volcanos from around the world," he said. "It was a marvelous experience, yet I still felt medicine calling."

Upon graduating, Knott became a medical scribe for three years, which would later lead him to pursue orthopedic surgery as a specialty. This included work across various specialties, including vascular and general surgery, emergency medicine, and sports medicine. "Working with

orthopedic/sports medicine physicians gave me an appreciation for the specialty and the patient population," he said. "This was my strongest affinity I felt toward any medical specialty across my experience."

Knott's journey to NYITCOM at A-State was inspired by a colleague and friend from Arizona State who attended the Long Island campus. "Based on that recommendation, I applied to the Arkansas school. This decision presented a valuable chance to gain insight into rural medicine, given my experience in an urban medical setting and my upcoming commitment to military medicine."

Through the military, Knott is a recipient of the Health Professions Scholarship Program (HPSP), which will enable him to work alongside his fellow Airmen for several years and experience diverse opportunities and locations. "I'm not sure where I will eventually take root," he said. "There is much of the world to see!"

A member of AMS since spring of this year, Knott has already been honored with the Best Medical Student NYITCOM award, along with three other students from his school. Of his recent AMS annual meeting attendance – and winnings – he noted, "I'm excited to see more of what this organization is capable of. It was amazing to be presented with the award and to network with various physicians and medical specialists from across the state. It was a unique experience to be in a room full of amazing people who are so active and passionate about what they do. As a student, it is nice to have a state membership that allows for collaboration between medical doctors (MDs) and doctors of osteopathic medicine

(DOs) as well as between local government and health legislators. The more opportunities for students and physicians of all backgrounds to come together, share ideas, and recognize each other's work, the more doors open for growth of the medical community and improved health for those we serve."

He encourages fellow students to take advantage of Society membership, which is free to students and provides opportunity to engage on the issues. "If you want to start making a difference in your community, it is important to be active within it. Talk with your colleagues and join local and national organizations to work through issues."

As he continues his medical studies, Knott has observed that financial literacy could be a stronger component of medical education. "We learn much relating to the health and wellbeing of the human body, but when it comes to understanding budgeting for our future, it's often cast aside," he said. "We should be doing better to prepare ourselves and the next generation to be more conscious of how money moves."

Outside of medicine, Knott enjoys nature and finding time each day to enjoy the pleasures of living – things he encourages others to enjoy as well. "It's good to get some fresh air, away from technology and the stress of the world," said Knott. "It's easy to forget yourself after making time for everyone else. Do yourself the courtesy of allowing your psyche to feel heard, too. Whatever your hobby, be present in that moment and appreciate yourself, away from all the rest of your responsibilities." ■

Treatment Resistant Depression (TRD)

BY DR. LOU ANN EADS, M.D. – ASSOCIATE PROFESSOR OF PSYCHIATRY, UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES

In the United States, the annual prevalence of major depressive disorder is estimated to be 7.1%¹. To manage TRD, there are a variety of medication strategies to employ besides psychotherapy. These strategies include changing to an agent from a different class, adding a second antidepressant to augment the limited effect of the first antidepressant, and augmenting with low-dose lithium or a second-generation antipsychotic. The literature supports the use of several different second-generation antipsychotics for augmentation of an antidepressant or as an adjunct treatment in partial responders. However, only olanzapine-fluoxetine combination (Symbyax) - has been studied in TRD as defined by the FDA².

Generally, it is estimated that approximately 30% of individuals who fail to respond to medication treatment are classified as TRD. However, defining TRD is complicated by a variety of definitions, and this has confused the literature and studies of TRD, leading to prevalence rates of 6% to 55%. The most common definition of TRD is adopted by the U.S. Food and Drug Administration and the European Medicines Agency (EMA), which defines TRD as an inadequate or failed response to a minimum of at least two antidepressants despite a trial of adequate length and dose.²

INTERVENTIONAL STRATEGIES:

Treatment options, other than medication management, include ECT (Electroconvulsive Therapy), r-TMS (Repetitive Magnetic Stimulation), and Ketamine (IV Ketamine = IVK, Esketamine = ESK). ECT sends an electrical stimulus to the targeted brain area, whereas TMS sends an electromagnetic stimulus to the targeted area. Ketamine acts by

stimulation of a brain neurotransmitter that, prior to Ketamine, was not targeted in the treatment of depression. This neurotransmitter involves targeting glutamate and NMDA receptors. The treatment options just outlined are often classified as interventional strategies. However, interventional strategies are sometimes referred to as neuromodulatory therapies. Their treatment aims to target and stimulate CNS areas to rest abnormal circuits.

ECT: The first ECT treatment recorded in the U.S. is thought to have occurred at McLean Hospital in 1941³. Since ECT was developed, it continues to play an essential role in TRD and remains the gold standard. Over the last 80 years, the procedure has been modified for safety and to minimize potential side effects, especially those associated with memory issues. ECT rapidly treats mood symptoms, particularly those with psychotic features. The treatments can be life-saving for catatonic presentations and acute suicidality. TRD ECT trials have yielded a pooled response rate of 60% to 80% and a pooled remission rate of 50% to 60%, a greater efficacy than medication management alone. Overall, ECT is a safe and effective treatment, with an estimated mortality of approximately 2.1 deaths per 100,000 annually; most deaths are secondary to a cardiovascular issue⁴. It is not uncommon to develop post-treatment confusion during an acute series, which in most cases will gradually resolve with time. However, there remains a small risk of lasting memory issues emerging. Pathological and imaging studies have not shown evidence of structural brain damage following ECT⁴. Imaging studies have found increased brain volume in the hippocampus and reported memory improvement.

R-TMS: The FDA approved r-TMS for the treatment of mild to moderate TRD in 2008 and anxious depression in 2021. The current protocol, approved by insurance, consists of treatments five days a week for six weeks, with chair time of 20 to 40 minutes, depending on the machine involved. Common side effects include headaches, twitches in the facial area, and some discomfort at higher treatment thresholds. Unlike ECT, there are no restrictions on driving, daily activities, or memory concerns.

KETAMINE

IVK: In the 1990s, IVK was found to produce a rapid decrease in depression and suicidality. A protocol for treatment was developed consisting of treating two to three times per week for a total of six treatments. Positive effects or responses from IVK can emerge rapidly (in hours). After a series, the effects usually last approximately three weeks before a booster may be needed. Unlike ESK, IVK is a racemic mixture of enantiomers. There is not felt to be an association between the dissociative effect and the efficacy of Ketamine (IV or ESK). IVK does not have an FDA indication to treat major depression or suicidality. However, there is extensive literature supporting its effectiveness.

ESK: In 2021, the FDA approved ESK to treat moderate to severe TRD as an augmentation strategy of the patient's current antidepressant. ESK differs from IVK in that it is composed only of the S-enantiomer, which reportedly has a three- to four-fold greater binding affinity at NMDA receptors⁵. ESK should be used cautiously with other agents that increase sedation, such as opioids and benzodiazepines. Ketamine's mechanism of action targets glutamate-binding sites, leading to stimulation of BDNF and m-TOR, resulting in neurogenesis and increased synaptic connectivity and growth. The use of ESK falls under a REMS (Risk Evaluation and Mitigation Strategy) program. The induction phase occurs twice weekly for four weeks, followed by weekly treatments for four weeks. If there has been significant improvement, the patient is given the option of long-term maintenance, which occurs every one to two weeks. ESK is contraindicated in individuals with aneurysmal disease, a history of bleeding in the brain, and in

pregnancies or breastfeeding. The dissociative effect of ESK can potentially increase the systolic blood pressure (b/p) by 40 points. As a result, it is recommended that the patient should have a pre-treatment b/p less 140/90 before starting each treatment.

In summary, TRD is associated with higher health care costs, unemployment, and medication costs. When established first-line treatment strategies for the management of a major depressive episode are not working or only partly working, moving quickly to other alternatives, such as interventional strategies, should be used to minimize patient suffering. ▲

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Dr. Lou Ann Eads, M.D., is an associate professor in the Department of Psychiatry at the University of Arkansas for Medical Sciences and medical director of the Interventional Psychiatry program at UAMS' Psychiatric Research Institute. She is an active member of the International Society for ECT and Neuromodulation.

AMS VICE PRESIDENT PROFILE

NAVEEN PATIL, MD, MHSA, MA, FACP, FIDSA
CASEY L. PENN



NAVEEN PATIL, MD, MHSA, MA, FACP, FIDSA SERVES THE ARKANSAS DEPARTMENT OF HEALTH AS DEPUTY STATE HEALTH OFFICER AND MEDICAL DIRECTOR FOR INFECTIOUS DISEASES. IN THESE ROLES, DR. PATIL OVERSEES SEVERAL PROGRAMS AND PROVIDES CLINICAL CARE IN ABOUT 100 CLINICS SPANNING ALL 75 COUNTIES. HE IS BOARD CERTIFIED IN INTERNAL MEDICINE AND INFECTIOUS DISEASES AND HOLDS A MASTER OF HEALTH ADMINISTRATION AND A MASTER IN GERONTOLOGY. AMONG OTHER APPOINTMENTS, AWARDS, AND ACCOMPLISHMENTS, HE IS A FELLOW OF THE INFECTIOUS DISEASE SOCIETY OF AMERICA AND A DIRECTLY INVITED FELLOW IN THE AMERICAN COLLEGE OF PHYSICIANS

Dr. Patil is passionate about public health and the impact it can have on Arkansas citizens. He is also committed to the Arkansas Medical Society and has been a member for two decades. A strong advocate for the organization, he makes it a point to do his part to help the Society grow and advance.

What inspired you to enter the field of medicine?

I've always wanted to serve those in need and looked up to medicine and service to the public since I was a child.

What is the value of AMS membership to you and to others?

The medical society is the premier organization that represents the interests of physicians of that state. Joining professional medical societies helps in building professional relationships, networking, and learning from the varied experiences of its membership. It helps in advocacy and outreach efforts for issues affecting healthcare and its delivery.

AMS is at the forefront of protecting physician and patient rights in Arkansas, and this is the most critical issue facing us today. It is reassuring to know that

this medical society will do everything in its power to ensure that physicians are treated with the respect they deserve so that they can provide the best patient care to the citizens of the state.

There is strength in numbers, and as a strong group representing over 12,000 medical students, trainee physicians, and those in practice, AMS is at the forefront of all healthcare related issues in our state. Every physician or aspiring physician should understand the importance of the medical society. I strongly urge medical students and trainee physicians to be part of AMS as it is free and provides avenues to enhance their career. We need to be proud of our affiliation with AMS as one of the oldest medical societies in the U.S., with a 150-year history to look back on.

You helped institute the inaugural student, trainee, and faculty awards bestowed during this year's annual meeting. You also assisted in establishing poster and abstract sessions. What is the importance of recognizing talented students, trainees, and faculty in this way?

To be recognized as the best in your field by the highest medical body in the state

is a prestigious honor. prestigious thing. The inspiration comes from the need to recognize young people, whether they're medical students or physicians in training who are committed to excel and advance the cause of medicine. They are the future of healthcare and of AMS, so we need to give them platforms to highlight their achievements. We are also committed to honoring the faculty who train these brilliant minds and to recognize them motivates them to further excel in their activities.

In the future, we want to acknowledge physicians and leaders who have contributed to the betterment of healthcare in the state and are an inspiration for those in the field.

Do you have hobbies outside of work?

Our time revolves around our two children who play tennis and inspire us with their hard work and competitive spirit. I'm also passionate about helping organizations that I'm affiliated with to grow and excel. I'm grateful to AMS and its members for giving me the opportunity to contribute. ■

Join ArkMed-PAC With New Contribution Levels and Benefits

You can join our political action committee, ArkMed-PAC, at the basic level for \$99 and with the Arkansas state income tax credit as an offset, your membership would not cost you a dime.

On joint returns, Arkansas law provides a dollar-for-dollar state income tax CREDIT of up to \$100 (\$50 on individual returns) for political action committee contributions (like ArkMed-PAC) and candidate campaign contributions. So, if you haven't already claimed the state political contribution credit, you could join ArkMed-PAC at the \$99 basic level and receive it back on a joint return as a tax credit.



Scott Smith
Director of Governmental Affairs



ArkMed-PAC new levels of membership and benefits are:

- **Basic membership** (\$99) includes: annual recognition in the AMS Journal and AMS website; invitations to Board meetings; and eligibility to request a specific campaign contribution from ArkMed-PAC be made to a candidate.
- **Capitol Club membership** (\$300) includes everything in basic membership plus: annual photo recognition in the AMS Journal and AMS website; special recognition at AMS annual meeting; invitation to separate event/reception/luncheon with invited legislators; and eligibility to deliver contribution checks.
- **Arkansas Diamond Club membership** (\$1,000) includes everything in Capitol Club membership (recognition, invitation and eligibilities) plus: one admission to Arkansas Diamonds Club Dinner with pin.
- **Corporate and Clinic membership** (\$5,000) includes recognition in AMS Journal and on AMS website, invitation to event with legislators listed above and four admissions to Arkansas Diamonds Club Dinner with plaque.

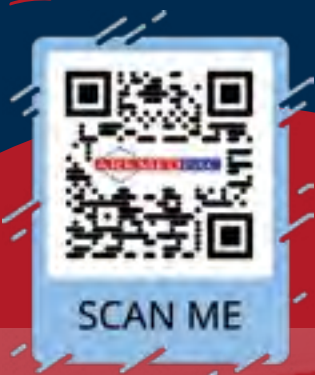
Trial lawyers, insurance companies and other groups adverse to physicians' interests are already out and working to support candidates, so we have no time to spare. Your membership in ArkMed-PAC will make a difference. A strong PAC is necessary in our advocacy efforts, because while your AMS dues go toward physician advocacy, AMS cannot legally contribute to candidate campaigns.

ArkMed-PAC's job is to provide campaign contributions to physician-friendly candidates. In order to have a successful legislative session next year, we must help elect physician-friendly candidates this year. The passage of last year's Prior Authorization Gold Card is a good example of the importance of campaign support. The lead sponsors were an AMS member-physician and a physician-spouse, both strongly supported by ArkMed-PAC in previous campaigns.

Other physician-friendly candidates need our help now, so please take a moment and join us in the fight today. For less than 28 cents a day (\$99 basic membership) you can start supporting physician-friendly candidates from your area and all around the state.

ArkMed-PAC is non-partisan, and the board is made up of physicians from all over Arkansas who are committed to utilizing your membership contribution effectively to help these candidates win so they can advocate for stronger, more physician-friendly policies. Visit our donation page <https://www.arkmed.org/advocacy/arkmed-pac/> or contact us directly at 501.224.8967.

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GRADUATE FROM ARKANSAS COLLEGE OF OSTEOPATHIC MEDICINE COMPLETED PRESTIGIOUS NASA INTERNSHIP

YEVGENIY ZHIVOTOVSKIY, A RECENT GRADUATE AT THE ARKANSAS COLLEGE OF OSTEOPATHIC MEDICINE (ARCOM), WAS CHOSEN TO INTERN WITH NASA AT THE LYNDON B. JOHNSON SPACE CENTER IN HOUSTON, TEXAS. THE INTERNSHIP, WHICH COMMENCED IN APRIL 2024 AND LASTED FOR FOUR WEEKS, REPRESENTED A UNIQUE OPPORTUNITY FOR ZHIVOTOVSKIY, WHO GRADUATED FROM ARCOM IN MAY. ZHIVOTOVSKIY, WHO WAS SERVING IN THE NAVY AND ACCEPTED INTO A FAMILY MEDICINE RESIDENCY AT NAVAL HOSPITAL CAMP PENDLETON, HAD EXPRESSED HIS INTEREST IN POTENTIALLY PURSUING A CAREER AS A NAVAL FLIGHT SURGEON, FOLLOWED BY AN AEROSPACE MEDICINE FELLOWSHIP. DESPITE HIS MILITARY COMMITMENTS, HE COULDN'T PASS UP THE CHANCE TO APPLY FOR THE NASA INTERNSHIP.

To secure his spot in the program, Zhivotovskiy submitted a comprehensive application, which included a recommendation letter from Dr. Shannon Jimenez, Dean of ARCOM.

The Aerospace Medicine Clerkship, offered twice annually in April and October, provided participants with formal lectures on space medicine topics, hands-on experience with the medical aspects of International Space Station operations, and insights into Exploration Medical Capability for deep space exploration. Zhivotovskiy and the other selected students were required to complete a research project and scientific poster, presenting their findings in an open forum poster session for the JSC Space Medicine Operations and clinical community, as well as other interested divisions/elements at JSC.

“My primary career goal has always been to become a competent and compassionate primary care physician. I believe that the NASA internship enabled me to connect with leaders in the medical community and gain a deeper understanding of Aerospace Medicine. I was thrilled to have

this unique opportunity to contribute to the field of space medicine and further my understanding of aerospace healthcare. This experience aligned with my long-term goals of becoming a well-rounded primary care physician,” Zhivotovskiy stated.

According to Dr. Jimenez, “Student Doctor Yevgeniy’s achievement reflected not only his academic excellence but also his unwavering commitment to advancing the field of medicine. As a primary care physician, Yevgeniy embodies the values of compassion and competence that we instill in our students at ARCOM.”

Only a maximum of 20 students were selected for this prestigious internship, making Zhivotovskiy’s achievement even more noteworthy. His internship at the Lyndon B. Johnson Space Center was an exciting step in his journey toward achieving his career aspirations ■

MY PRIMARY CAREER GOAL HAS ALWAYS BEEN TO BECOME A COMPETENT AND COMPASSIONATE PRIMARY CARE PHYSICIAN. I BELIEVE THAT THE NASA INTERNSHIP ENABLED ME TO CONNECT WITH LEADERS IN THE MEDICAL COMMUNITY AND GAIN A DEEPER UNDERSTANDING OF AEROSPACE MEDICINE.

UAMS CONGRATULATES 2024 AWARD WINNERS

CONGRATULATIONS TO THE MANY UAMS COLLEGE OF MEDICINE STUDENTS, RESIDENTS, FELLOWS AND FACULTY WHO WERE HONORED AT THE ARKANSAS MEDICAL SOCIETY’S ANNUAL MEMBERSHIP MEETING IN MAY.

The AMS instituted a new awards program this year to recognize the outstanding work of both learners and educators. Nominated by program directors, faculty and colleagues, the honorees from UAMS and other institutions were selected for their academic achievements, scholarly work, leadership and community service, and other criteria. The honorees are listed here and featured in the meeting program. ■

NYITCOM AT A-STATE CELEBRATES 96% MATCH RATE AND 99% PLACEMENT RATE

NEW YORK INSTITUTE OF TECHNOLOGY COLLEGE OF OSTEOPATHIC MEDICINE AT ARKANSAS STATE UNIVERSITY (NYITCOM AT A-STATE) HAD PLENTY TO CELEBRATE IN MARCH AS ITS CLASS OF 2024 ENJOYED A 96% INITIAL MATCH RATE AND A 99% PLACEMENT RATE THROUGH THE NATIONAL RESIDENCY MATCHING PROGRAM (NRMP).

NYITCOM at A-State was established to train medical students to help address a growing physician shortage in Arkansas and the Mississippi Delta region. This year, more than half of NYITCOM at A-State graduates were placed into programs that will keep them in Arkansas, a targeted-Delta state, or a state contiguous to Arkansas. Among these students is Max Bacot, who will perform his family medicine residency at the University of Arkansas for Medical Sciences (UAMS) Northeast in his hometown of Jonesboro.

“It’s huge for me to be able to stay here,” said Bacot, who moved to Jonesboro with his family as a baby and attended A-State before his acceptance to NYITCOM. “I grew up here. This community pours a lot into students and is a really special place. I want to eventually practice here, so to be able to continue to train and grow right here in Jonesboro, it’s incredibly exciting.”

The school also encourages students to pursue primary care specialties due to the significant needs in those areas in Arkansas and the Delta. This year, 65% of NYITCOM at A-State students matched into primary care positions, including 30% in internal medicine, 15% in family medicine, and 20% who will specialize in psychiatry, pediatrics, general surgery or obstetrics/gynecology.

This year’s Match saw NYITCOM at A-State students land at a number of nationally recognized programs, including Vanderbilt University, Barnes Jewish Hospital, Cleveland Clinic, and Mt. Sinai Health System.

Deel Appointed to GME Expansion Board

Arkansas Governor Sarah Huckabee Sanders announced in April that Amanda Deel, DO, has been appointed to the Graduate Medical Education Residency Expansion Board. Deel, who serves as associate dean of academic affairs and graduate medical education at NYITCOM at A-State, is a native of New Edinburg, Ark., and is a founding faculty member at the Jonesboro-based medical school. The Graduate Medical Education Residency Expansion Board is responsible for reviewing requests for state funds to expand residency programs and create new ones in Arkansas.

DPHI Receive Grant to Address Maternal Health

This spring, NYITCOM’s Delta Population Health Institute (DPHI) received a

\$114,380 grant from the Blue & You Foundation for a Healthier Arkansas to be used to address maternal and pediatric health in rural Arkansas. The DPHI serves as NYITCOM at A-State’s community engagement arm and operates a number of programs that work to catalyze an equitable culture of health by leveraging its assets in education, research, policy, and community engagement in the Delta. Through its most recent grant, the DPHI will utilize its Community Champions of Health model to create community health leaders through customized learning and care communities where women, mothers, and children can learn how to improve maternal and pediatric health outcomes and curb/prevent adverse childhood experiences in underserved areas of rural Arkansas. ■



STARTING FROM SCRATCH

SAM TAGGART, MD



Dr. Matthew Cunningham of Little Rock, courtesy of Historical Research Center, UAMS Library

WHEN THE UNITED STATES OBTAINED THE LOUISIANA PURCHASE FROM THE FRENCH IN 1803, THERE WERE FEW PEOPLE LEFT IN THE WILDERNESS OF THE TRANS MISSISSIPPI. ACCORDING TO THE ARKANSAS ARCHEOLOGIC SURVEY, THERE WERE APPROXIMATELY THREE TO FOUR THOUSAND NATIVE AMERICANS, 365 EUROPEAN TRAPPERS, HUNTERS, SMALL FARMERS, AND SIXTY-FIVE AFRICAN AMERICAN SLAVES IN THIS PLACE WE CALL ARKANSAS.

There were good reasons why the place we call Arkansas was poorly populated. The swamps of East Arkansas, mosquitoes, horse flies, and various fevers provided formidable obstacles to new settlement. An early historian described Arkansas as “The boundaries of a great game reserve.”

Most of the young immigrants were poor young men looking for a piece of good land that was unclaimed. Often they came alone, cleared a plot of land, built a house, and a year or so later sent for their family. According to Archibald Yell, one of the early governors of Arkansas, “Every man left his honesty and every woman her chastity on the other side of the Mississippi.”

One of the first university-trained physicians to go beyond the borders on the East and the North was Dr. Matthew Cunningham, who set up camp in the newly established settlement of Little Rock in 1818. Matthew was a native of Philadelphia and attended the University of Philadelphia Medical School under

the tutelage of Dr. Benjamin Rush. After medical school, he spent a brief time in Europe “seeking to improve himself in the practice of his profession.” He first practiced in New Orleans for two years before returning to New York. In 1817 he and his wife moved to Missouri. Two years later, he moved to Arkansas, leaving his wife behind in Missouri. It is alleged that he was the first permanent white European settler in Little Rock. Several notes indicate that when he arrived, the only other building was a small shack used as a military post.

The American Indians had a presence in Little Rock going as far back as 1541. Various travelers throughout the state mention homesteads up and down this part of the river. There is a high probability that Dr. Cunningham was one of the first settlers in Little Rock. His wife was most certainly the first white European female to call Little Rock home. Dr. Cunningham set up a practice, opened a pharmacy, and became the Father of Modern Medicine in Central Arkansas. He

was to be the first coroner, the first Mayor of Little Rock, and was instrumental in setting up the first Board of Health.

An interesting question that should be asked is: Why Dr. Cunningham came all the way from the East coast to set up a practice of medicine and a pharmacy in a territory that had few people? Physicians, university-trained or not, weren’t held in high esteem and competition was stiff. There were no laws or regulations as to who could call themselves a doctor and the general public did not differentiate between those with a degree and those without. Because of the large number of physicians, competition was stiff and the first man to hang out a shingle had a leg up on the competition. A significant number of physicians saw themselves as only part time doctors using medicine as a springboard into business or politics. Many of the physicians who populated the state went on to become prominent politicians in the State of Arkansas. ■

Courtney Salmon, MHSA
Director of Practice Support

The Arkansas Medical Society is excited to welcome Courtney Salmon, the new Director of Practice Support! With over 15 years of experience in practice management and revenue cycle management, Courtney brings a wealth of knowledge and expertise to AMS. Born and raised in Arkansas, Courtney now resides in Benton with her husband and two sons. In her spare time, she enjoys watching her sons play sports.



Earning her Masters of Health Service Administration (MHSA) from the University of Arkansas for Medical Sciences (UAMS) in 2007, Courtney has held numerous leadership positions in both Primary Care and Specialty Practices. In her role at AMS, she will provide experienced support for clinics, assisting with operational issues and interactions with payors, and helping AMS advocate for physician and patient friendly health policies. Courtney is eager to share her extensive knowledge with physicians and their staff across the State of Arkansas.

SUPPORT FOR YOUR PRACTICE

AMS fills a unique role that benefits both the physicians and their practice. Office managers and clinic staff have access to our practice management team, who offer experienced support with payors and day-to-day practical solutions for medical practices. Areas of support that we frequently assist with include billing, medical records, Human Resources and more.

AS AN AMS MEMBER, YOU HAVE ACCESS TO:



- Clinic Operational Support.
- Assistance with Payor Disputes or Claim Issues.
- CMS Policy Changes.
- Medical Records Retention Guidelines.
- Other Clinic Educational Opportunities For Your Staff.

RISK MATTERS: MINIMIZING THE RISK WITH TEMPORARY EMPLOYEES

JEFFREY A. WOODS, JD, DIRECTOR OF RISK EDUCATION, SVMIC
REPRINTED FROM THE SVMIC SENTINEL

AS REPORTED BY MANY NEWS OUTLETS AND INDUSTRY EXPERTS, THE HEALTHCARE PROFESSION IS SUFFERING A SEVERE SHORTAGE OF WORKERS AT EVERY LEVEL. THIS CRISIS WAS ONLY WORSENERD BY THE COVID-19 PANDEMIC AND IS PROJECTED TO CONTINUE FOR THE FORESEEABLE FUTURE. AS A RESULT, HEALTHCARE INSTITUTIONS AND MEDICAL PRACTICES ARE HIRING TRAVEL NURSES AND OTHER TEMPORARY LABOR TO OFFSET THE STAFFING SHORTAGES THAT CURRENTLY EXIST. WHILE TEMPORARY PERSONNEL CAN PROVIDE A MUCH-NEEDED STOPGAP, THEY CAN SOMETIMES INCREASE POTENTIAL LIABILITY FOR PROVIDERS AND AFFECT PATIENT SAFETY DUE TO A LACK OF STABILITY AND CONTINUITY.

Travel nurses and other temporary staff are typically highly trained and experienced; but they often come from other states or regions of the country. For example, they may have previously practiced in a large urban facility or teaching hospital, whereas now they are being asked to work in a small rural community health center which often has limited resources. Policies and procedures as well as technology (such as the EHR) can differ between these locations. Tasks which may be legally delegated can vary from community-to-community, and routine procedures such as when to contact the on-call provider can be inconsistent. Moreover, the standard of care in the current community may differ from that of their usual community. These differences can and should be addressed through discussion and training at the outset by the facility/employer to minimize risk. ■

Providers should also take affirmative steps to integrate the temporary staff and reduce risk:

Use effective communication to ensure you are on the same page

Be clear in your instructions

Don't make assumptions about proficiency regardless of level of experience

Don't be afraid to follow up

Be approachable - invite questions and encourage contact

Document, document, document

MINUTES OF THE ARKANSAS MEDICAL SOCIETY

BOARD OF TRUSTEES MEETING

FRIDAY, MAY 17, 2024 @ 4:00PM

EMBASSY SUITES, LITTLE ROCK



The Arkansas Medical Society Board of Trustees met at the Embassy Suites in Little Rock on Friday, May 17, 2024. AMS Board Members and Past President's attending were Drs. Ahmed Abuabdou, Seth Barnes, Brad Bibb, Dale Blasier, Samuel Bledsoe, Lyle Burdine, Willard Burks, George Conner, Anthony Davis, Jacob Dickinson, David Dobies, Jennifer Doyle, Candace Franks, James Hunt, Emma Jacobs, Anthony Johnson, Riley Lipschitz, Issam Makhoul, Nirvana Manning, Amanda Novack, Naveen Patil, Mark Ramiro, Carolyn Reeves, Mark Renno, Bala Simon, Jerakaycia Smith, Shannon Cooper, Stacy Zimmerman. AMS staff present were David Wroten, Scott Smith, Mary Ann Mansfield, and Nicole Richards. AMS Legal Counsel present was Mike Mitchell.

Chairman, Dr. Seth Barnes called the meeting to order and the following business was received and transacted:

1. Dr. Barnes welcomed members to the meeting. He called for any necessary disclosures to be made.
2. Dr. Barnes asked for a motion to approve the board minutes

from February 7, 2024, and the executive committee minutes from March 5, 2024 and March 7, 2024. There was a motion and a second. **The motion passed.**

3. Dr. Barnes asked to recognize and welcome new board members. Ahmed Abuabdou, MD, a physician in district 8, stood and introduced himself.
4. Dr. Barnes recognized the outgoing board members and handed out their plaques.
5. Dr. Barnes announced that there was a vacancy in District 4. He nominated Sarenthia Epps, MD, a physician from Pine Bluff to fill the vacancy. There was a motion and a second. **The motion passed.**
6. Dr. Barnes announced that there was also a vacancy in District 8 to replace Dr. Patil following Dr. Patil's election as Vice-President. The vacancy will be filled at the August meeting.
7. Dr. Barnes called for a motion to approve the Life and Emeritus

Dues Exemption list (attachment 2). There was a motion and a second. **The motion passed.**

8. Dr. Barnes called on EVP David Wroten to give his report. Following Mr. Wroten's report, Dr. Barnes called on all members of the board to give to the PAC,
9. Dr. Barnes called on the Director of Governmental Affairs, Scott Smith, to give an advocacy update.
10. Dr. Barnes called on Dr. Tony Johnson to give an update on the Obesity, Addiction, and Mental Health Work Group.
11. Dr. Barnes thanked the board for the opportunity to serve as Chair.
12. Dr. Barnes called for nominations for the Chairperson of the Board. Tony Johnson, MD was nominated from the floor. There was a motion and a second. The motion passed.
13. Dr. Johnson, newly elected chairman of the board, thanked everyone and adjourned the meeting. ■



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AMS Benefits was created by the Arkansas Medical Society to delivery quality insurance coverage to Arkansas physicians, their families, and their staff. We understand your busy schedule and will work to give you the protection you need to focus on your patients.

Alanna Scheffer, AMS Plan Administrator

amsbenf@arkmed.org

ARKMED.org/resources/AMSBenefits

501-224-8967

Agency NPN# 1650351

NPN# 1653222

AR License #100112594





150
YEARS

**Don't miss next year's annual event as we
celebrate the Arkansas Medical Society's
150th anniversary!**

This milestone marks a century and a half of dedication to improving healthcare in Arkansas and supporting our physicians. Join us for a special celebration that will honor our rich history, recognize the achievements of our members, and look forward to a future of continued excellence in medical care. This is an event you won't want to miss, filled with inspiring speakers, valuable networking opportunities, and a chance to reflect on the incredible journey of AMS over the past 150 years.

Join us May 2025!

More details to come throughout the year.



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Together, we go further.

The practice of medicine is full of unforeseen challenges, and an experienced, proactive partner will help navigate them. As a premier provider of medical malpractice insurance, our in-house attorneys and unique array of tailored services are always at the ready to help you be prepared for what lies ahead.

