



WESTCHESTER PHYSICIAN

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PRESIDENT’S MESSAGE

PART IV—YOU GOT MY ATTENTION. NOW HOW CAN I HELP? BRUCE MOLINELLI, MD PRESIDENT

“We are the champions my friend and we’ll keep on fighting til the end “ -Lyrics from We Are the Champions ,News of The World by Queen , 1977.

Will we? Will you?

Physician champions. What it is and why?

So we physicians often face crossroads throughout our career—follow the path that we are on that leads to an unknown destination determined by our current trajectory or branch off to a different unknown path forging through a different trajectory fueled by a spark of dissatisfaction or concern of our current course.

The reinvention of our careers is a natural evolution promoted by purpose and self worth.

Perhaps you already made the change from private to employed or vice versa, or academic to clinical or remained at your original practice.

You may have moved from clinical to administrative or clinical to corporate or industry or changed to a different career, or retired, slowed down, or rebuilt.

All these are crossroads...perhaps healthy self introspective pauses and checks along the way of our ultimate path through our professional lives.

So I would submit that physician advocacy is a tool towards these purposeful choices to help navigate the chosen path and the crossroads. It could be utilized to preserve the chosen path you already have deemed pertinent, important, cherished and planned . Perhaps it is the mechanism allowing you the assurance of choosing wisely at the inevitable crossroad.

But nonetheless, physician advocacy is a method by which you can ward off outside forces knocking you off your path or helping you choose the right path.

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BRUCE MOLINELLI, MD
President, WCMS

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*FROM THE EDITOR...***BOOK REVIEW**
PETER ACKER, MD**Bellevue: Three Centuries of Medicine and Mayhem at America's Most Storied Hospital**
By David Oshinsky

I was an intern in 1982 at Bellevue hospital working in the pediatric emergency room one Friday night. A one year old year boy accompanied by his mother presented to the triage area complaining of fever and a rash. Certainly this, on the surface, did not appear to be a remarkable event. However, it turned out to be anything but ordinary. First off, the mother recounted that she and her son had flown directly from Peru to JFK and then taken a taxi directly to Bellevue. It was her first visit to the United States and she spoke no English. Secondly, the rash was unusual and dramatic, looking like a severe case of seborrheic dermatitis mixed with purpura. Many doctors probably wait decades to see their first case of Histiocytosis X, but I, at the nascence of my medical career, could cross that disease of my list just as a bird watcher may do so upon sighting a rara avis. I remember at the time marveling that this woman from Peru, summoning that maternal energy and resourcefulness that has sustained our species through the ages, had the wherewithal to travel thousands of miles fueled by the confidence that Bellevue would save her child.

Bellevue occupies a unique place in the pantheon of hospitals. It arguably is America's first hospital and has a number of firsts to its credit such as creation of a civilian ambulance corps, a nursing school, depts. of psychiatry and pediatrics. From yellow fever to Ebola, it has "seen it all". Because of this along with my personal connection, I picked up David Oshinsky's history of Bellevue with alacrity and it fulfilled all my expectations relating cogently the broad sweep of its history over three centuries and skillfully intertwining it with the sociologic and political history of New York City itself. It is Dickensian in its scope and depicts medicine in its cruelest and crudest and has vivid portrayals of the various characters both on the medical side and the patient side. For example Norman Mailer was committed to Bellevue for stabbing his wife while drunk, apparently because she told him that "he couldn't shine Dostoyevsky's shoes". Mailer kept a detailed journal of his seventeen days there.

(Continued on page 11)



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PRESIDENT'S MESSAGE**PART II—GIVE ME SOMETHING****BRUCE MOLINELLI, MD PRESIDENT***(Continued from page 1)*

The method is clear. Our medical profession needs to lobby since that is the means by which our society functions. It may not be our method of choice—perhaps actions, results, honorable intentions and noble causes for universal good would be a description of our profession's method... at least historically. But today, reformulation of our structure is apparent and the method is petitioning and lobbying our legislators to present an accurate depiction of our profession's challenges in order for change.

If we step back for a moment and try to view the medical profession through those early eyes of that young medical student and resident, we would once again be impressed by what the medical sciences have achieved and developed over the years—what we can now offer our patients to avert pain and suffering, protecting a higher quality and quantity of life. It remains truly remarkable!

Are we healthier than our predecessors? Absolutely!

Are we different? No—we still have the same obstacles and challenges but perhaps better tools and data—interpretation and utilization of the data is still the sentient beings challenge—for all generations past and present.

So back to our generation's slice of time—we have a finite limited professional lifespan—what choice have we made, as a physician, fulfilling our contribution with passion for this field of medicine—and how do we achieve this, even when challenged with preservation of something we hold dear that seems to not be apparent to all others? Well if what we have always held dear remains that underlying tenet universally held by physicians alike—care of our patients—then the answer is physician advocacy.

In previous newsletters, I've discussed our profession's noble cause—from patient care to patient advocacy—our challenges we face today—from intervening agencies to burnout—our professions' resolve to protect the cause—from self governance to autonomy

Our method—professionalism as support of one another.

Rest assured that the honorable goal we hold dear as physicians is equally represented at the level of our supportive medical societies.

So we need the motivated who will understand the challenges, collect the information from their con-

stituency and promote the cause—aka Physician Champion. We need the champions to declare themselves. We need those who can step up to do so.

That is, we need you!

We must identify those of us who are interested and capable of participation in the promotion of physicians to allow our profession to remain in the conversation of how health care should be delivered locally regionally, nationally. The influx of corporate money has been a major component of our profession over the years and with that comes a certain expectation of control. We may not control the money but we should control use of the science and the method by which we physicians choose to deliver care. In essence, lead the money to the appropriate use of our science and delivery care systems that we physicians direct.

I would ask that we each decide for ourselves whether our satisfaction with our career remains despite the changes of our surroundings. If we are content with our current method of delivering patient care as we foresaw, then our professional balance is sound and we are among the privileged and blessed. If there are inevitable changes of the method of delivery of care we think could be better managed, then we need to step forward and become a Physician Champion.

The honorable practice of the profession of medicine is a career long endeavor allowing us the privilege to affect positively the lives of our patients. We must maintain our resolve no matter the plethora of adversarial naysayers. Giving up is not a viable option. Protect the physician and we have protected our patient.

‘Grit is passion and perseverance for very long-term goals. Grit is sticking with your future day in, day out, not just for the week, not just for the month, but for years, and working really hard to make that future a reality. Grit is living life like it's a marathon, not a sprint.’ from “Grit: The Power of Passion and Perseverance”, Angela Duckworth



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STOP THE TRAIN
Elliot Barsh, MD

“You are the sky. Everything else is just the weather.”

Pema Chodron

I hope the holidays are finding you healthy and happy.

Sometimes I feel like the **“sky”**, and sometimes like an **“old birch”**.

More like an “old birch” since COVID-19.

In fact, we are both.

Jenny Dsouza believes that the sky is **“clear and vast”**, like us.

The weather can cloud our view every now and then, and when the storms pass, we are still there.

We are there to create a warm and safe place for our patients to meet us and to heal.

Richard Wilbur, our second poet laureate, used an old birch as a metaphor for how we can **master our presence** as time passes.

We can appreciate who we are and who we have a chance to be.

We can open our hearts and minds and allow ourselves to grow stronger as we understand and appreciate others.

We can **stay connected and motivated**, not detached or cynical, no matter how hard and tough times get.

We can show our patients how to **“grow, stretch, crack, and not yet come apart.”**

I hope our new year is healthy and happy!

Thanks for reading.

Be safe.

“This year’s been tough; I feel haggard, “roughened” like the bark that used to be “smooth, and glossy-dark.”

A Black Birch in Winter

Published in *The Atlantic* in 1974

Why Dickens Haunts Us

He is the man who brought fantasy to Christmas.

“The seven principles are good to live by, and I am definitely not a millennial.”

How to Apply the Seven Principles of Kwanzaa to Millennial Life

A Black Birch in Winter - *Richard Wilbur*

You might not know this old tree by its bark,
 Which once was striate, smooth, and glossy-dark,

So deep now are the rifts that separate
 Its roughened surface into flake and plate.


Fancy might less remind you of a birch
 Than of mosaic columns in a church
 Like Ara Coeli or the Lateran
 Or the trenched features of an agèd man.

Still, do not be too much persuaded by
 These knotty furrows and these tesserae
 To think of patterns made from outside in
 Or finished wisdom in a shriveled skin.


Old trees are doomed to annual rebirth,
 New wood, new life, new compass, greater girth,
 And this is all their wisdom and their art—
 To grow, stretch, crack, and not yet come apart.

♦

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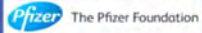
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MSSNY Podcasts

MSSNY

The Medical Society of the State of New York has created a number of podcasts on topics that are timely and relevant. In addition to weekly MSSNY Updates from the Division of Governmental Affairs, there are myriad timely and relevant podcasts on COVID-19 (both for physicians and patients) as well as a number of others on veterans, adult immunizations and emergency preparedness.

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Click on the podcast titles to listen

MSSNY Announces two NEW Podcasts on COVID-19

★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

★★The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast website!★★

ANNOUNCEMENT

Medical Society of the State of New York

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TAKE ACTION: Wrongful Death Bill is on the Gov's Desk/Act Now to Save the Healthcare of NY

Colleagues:

Your patients and your colleagues need your help.

Please urge Governor Hochul to veto the wrongful death bill at the MSSNY Grassroots Action Center. Senate Bill S74A is on Governor Hochul's desk TODAY. She now has 30 days to sign the bill into law or veto it. If you have already acted, thank you very much, but please make sure your colleagues, friends, and family members are aware of this easy way to send a message to the Governor.

Called the Grieving Families Act by some, **this bill will expand recovery rights of a decedent's surviving "close family"** in a wrongful death case and significantly increase monetary sums awarded. One actuarial study estimates a 40 % increase in liability insurance premiums! It has the potential to affect the availability and affordability of medical professional liability insurance in New York State and drive dedicated healthcare professionals away. Because the bill is so far-reaching, it has also been strenuously opposed by organizations representing hospitals, municipalities, and businesses. Use the following items to amplify your voice, help raise awareness, inform the media, and inspire social media conversation:

[Letter to Governor Hochul](#)

[Op-ed](#)

[Social Media Posts](#) and [Graphics](#)

[Talking Points](#)

[Advertorial/Print Ad](#)

[Digital Banner Ads](#) and [Graphics](#)

Take a Stand on Social Media Today!

Reach out to Governor Hochul now.

Facebook: [@Governor Kathy Hochul](#)

Twitter: [@govkathyhochul](#)

Instagram: [@govkathyhochul](#)

Following are links to some of the op-eds MSSNY and county medical society physician leaders have placed this year:

[Commentary: Wrongful-death liability bill is the wrong plan for New York \(Times Union\)](#)

[Pending liability legislation will jeopardize New York's strained health care system \(USA Today/Journal News\)](#)

[Medical society leaders: NY's new liability law threatens access to care \(Syracuse Post Standard\)](#)

[Another Voice: Bill to increase wrongful death damages would be devastating to New York doctors and patients \(Buffalo News\)](#)

You are the best advocate for your profession, your practice, and your patients. Please contact the Governor NOW.

Parag Mehta, MD
President, Medical Society of the State of New York



Wishing

All of our Members and Your Families a

Happy and Healthy New Year!

WCMS Staff and Board of Directors

MSSNY HOD

The MSSNY House of Delegates will take place on Saturday, April 22, 2023 with CME events to be held on Friday, April 21, 2023. The HOD will be held at the Tarrytown Marriott in Tarrytown, NY. The house will open at 8:00am on April 22.

If you are considering writing a resolution to the HOD you must submit it to our Delegate Chair, Dr. Bonnie Litvack for review and approval by the entire delegation.

Resolution Deadline

Resolutions will be due no later than **Wednesday, March 1 2023**. Resolutions can be submitted at any time but will be **considered late if submitted after close of business (5 PM) on that Wednesday**. Information regarding proper style and other criteria will be posted to the MSSNY website. Please follow those instructions and most importantly *be sure to research the subject matter* thoroughly, citing your research and existing MSSNY policy at the end of the resolution.

Please contact our office if you plan to submit.

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Happy Holidays!

*FROM THE EDITOR...***BOOK REVIEW****PETER ACKER, MD***(Continued from page 2)*

Bellevue's history is of course full of unique drama. My own time there included 3 years of pediatric residency, two years of fellowship in the pediatric outpatient and emergency departments and several years of moonlighting as an attending in the emergency room encompassing the 80's and early 90's. This coincided with a seminal event in the history of infectious disease, the unfolding of the AIDS epidemic. It was no surprise, with its strong tradition of treating all comers that it was at the center of the effort to identify and treat this epidemic. I remember vividly taking care of pediatric patients in my internship that were quite ill, but without a definitive diagnosis – only in retrospect did we realize that some of them were some of the first pediatric cases of AIDS. Soon after it was characterized as a syndrome, but we did not know the cause. The spirit de corps that infused the medical and nursing staff in confronting this

during this scourge remains a point of immense pride in the character of this institution.

Full of novelistic detail, it keeps the reader on the edge of his seat as each story unfolds and it captures the spirit of the institution. I highly recommend this book to anyone with an interest in medicine, history, politics, sociology, public health, epidemiology or just anyone who wants to read a thrilling story. A wonderful read!



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