

BACKBONE

a publication of the Connecticut Orthopaedic Society

Volume 14

Summer 2010

President's Corner Brian Smith, M.D. - President



What a year this has been in healthcare. While the election of Scott Brown in Massachusetts to the US Senate lulled many people into thinking that not much would happen this year, that was certainly not the case. The Healthcare Reform or so-called "Obama Care" passed the House and was signed by the President in March. Changes related to this new legislation are already hap-

pening incrementally and it remains to be seen what the ultimate impact this dramatic and sweeping change will have on our patients and our profession. On the national level, the 21% cut in Medicare has been in and out and seems to be patched temporarily without any final solution in the immediate future. The ability of orthopaedic surgeons to continue to see Medicare patients is becoming increasingly constrained by declining reimbursements. In the most recent *Journal of Bone and Joint Surgery*, June of 2010, a review of the healthcare challenges faced by Medicare in an orthopaedic forum article by Drs. Kevin Bozic and Dr. Todd Albert included a poll of members of the American Orthopaedic Association. The numbers cited in the poll by Drs. Bozic and Albert include the fact that 71% of respondents at the annual meeting of the AOA in 2009 believe that without Medicare Payment Reform, a substantial number of orthopaedic surgeons will opt out of Medicare in the future. Clearly this would have a huge impact on the access of patients over 65 years of age to orthopaedic specialty care.

On the local level, the Society has been busy in the legislative arena with physician representation on key initiatives including precertification and payment along with active opposition to proposed CON policy changes (see page 6 for legislative update). Several of our members, facilitated and assisted by our lobbyist, Mr. William Malitsky worked diligently on these initiatives including F. Scott Gray, MD along with Frank

Gerratana, MD who personally lobbied House Speaker Christopher Donovan about contracting and payment issues. Vice President, William Cimino, MD and Secretary/Treasurer Ross Benthien, MD were active on the CON policy changes proposed. We owe them our gratitude for their commitment and activity supporting our interest on behalf of all members.

Dr. Frank Gerratana from New Britain also provided liaison with the state legislators and was instrumental in representing the COS at various fundraisers while hosting key events as well. It has been said that if we are not at the table, then we are usually on the table being carved up and that is clearly not where we would like to be as these healthcare reform issues are ongoing. Our two representatives to the AAOS Board of Councilors, Dr. Michael Marks, MBA from Norwalk and Dr. Mike Connair from New Haven, led our COS contingent at the Annual National Orthopaedic Leadership Conference in Washington, DC in April. They were instrumental in expressing key concerns with Medicare and other national issues to Connecticut's Representatives and Senators. We were also well represented in Washington by board members, Vice President Dr. Bill Cimino, Dr. Bruce Browner and Dr. Mike Aronow.

With significant changes on the political horizon, I would like to make a special request to consider supporting the AAOS Orthopaedic Pac, which is directed by Dr. Stuart Weinstein. Recently, the AAOS Pac has reached a dollar level, making it even larger than that of the AMA. However, the percentage of orthopaedic surgeons in Connecticut that actually contribute is surprisingly low and our goal is to have as many orthopaedic surgeons in Connecticut contribute as possible. Remember, the AAOS Pac represents our interest in Washington, which is critically important in this age and time. It

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Annual Meeting Highlights

Orthopaedist of the Year

Robert A. Green, MD, received the Connecticut Orthopaedic Society's Orthopaedist of the Year award for 2010. He was nominated and elected for the Society's prestigious award by the Board of Directors. Dr. Green was honored for his significant contributions and dedication to the orthopaedic profession and as a mentor to orthopaedic residents. His longtime friend and colleague, John O'Brien, MD, presented his award at the Society's Annual Meeting on May 14th in Farmington, CT.



Robert Green, MD (left) accepts the Orthopaedist of the Year award from Society President Brian Smith, MD, (r) at the Annual Meeting on May 14, 2010.

(Photo Credit: Frank Gerratana, MD)

Dr. Green is a Past President of the Society where he was instrumental in fostering the involvement and participation of orthopaedic residents in Connecticut. Recognizing the need to support the education of young residents, he spearheaded the promotion and fundraising of the Society's charitable organization, the Connecticut Orthopaedic Foundation which has contributed over \$60,000.00 to the Yale and UConn Residency programs since its inception.

He received his medical degree from the Universite de Paris-Sud and completed his orthopaedic residency at the University of Connecticut in Farmington, Connecticut. Dr. Green is a board-certified orthopaedic surgeon in Hartford County and is Senior Attending Staff in orthopaedics at St. Francis Hospital and Medical Center where he served as Chairman of the Department of Orthopaedic Surgery and President of its medical staff. He is also on staff at John Dempsey Hospital, the Connecticut Children's Medical Center and Hebrew Home and Hospital in the Hartford County area.

He serves on many boards including the Hartford County Medical Association, State of Connecticut Medical Examining Board and St. FrancisCare. Dr. Green resides with his wife in West Hartford, CT, where he is active in his community and with the Beth El Temple of West Hartford.

Yale & UConn Resident Paper Awards



Recipients, Quasi Hammouri, MD - Yale (left) and Brad Carofino, MD - UConn (right) with President, Brian Smith, MD (center) at the Society's Annual Meeting on May 14, 2010.

(Photo Credit: Frank Gerratana, MD)

Residents from each of Connecticut's orthopaedic residency programs presented papers at the Annual Meeting on May 14, 2010. Resident Papers were selected by the heads of each residency program.

The following were presented:

UConn - "Platlet Rich Plasma Efficacy is Decreased When Combined with Corticosteroids or Anesthetics – An In Vitro Study" **Presenter: Brad Carofino, MD**
Authors: Brad Carofino, MD, D. Chowanec, MD, M.B. McCarthy, MD, Robert Arciero, MD and Augustus Mazzaco, MD

Yale - "Distinguishing Lyme Arthritis from Septic Arthritis in Children Presenting with a Joint Effusion"
Presenter: Quasi Hammouri, MD Authors: Quasi Hammouri, MD, Matthew Milewski, MD, Aristides Cruz, Christopher Miller, BA and Brian Smith, MD

The Society is pleased to support the active participation of orthopaedic residents in order to foster relationships, communication and commitment to organized medicine.

Fall 2010 Workshop

"Contracting with Insurance Companies: Pitfalls to Avoid" Details to Follow!

President's Corner

(cont. from front page)

is vitally important that Dr. Weinstein be able to say that the AAAOS Pac represents 75% to 80% of members to enhance the impact of the significant dollar value of the PAC. Please consider contributing, even it is just \$20 or \$25 so that Connecticut's participation rates increase.

True to our heritage and commitment to our patients, a number of our members volunteered their time in Haiti following the earthquake disaster and other countries where needy citizens are in need of orthopaedic care. Their actions and generosity demonstrate the best that we have to offer our fellow citizens from our profession.

It has also been a very successful year for our State Orthopaedic Society. One highlight was the award of our executive director, Susan Schaffman as the AAOS State Society Executive Director of the year. This was a well-deserved honor for Susan and again reflects the high esteem that our Society is held nationally. Several years ago, we were the State Society of the Year and now to have our director named Executive Director of the Year by the AAOS is indeed a true honor.

Some of the activities of the Society include our annual coding meeting with Mary LeGrand headlining this, which continues to be very successful and well received by our members. Dr Michael Marks led several well-attended patient communication workshop, advocating our academy's principles on how to interact with patients. In addition, Society members received CMIC premium credits for attending the workshop.

Finally, the Annual Meeting was attended by a near record number of attendees, including 115 orthopaedic surgeons and 19 orthopaedic residents from our two programs. Special thanks to Dr. Michael Kaplan, Program Director for organizing a successful educational program. Despite the economic downturn, we had a record number of vendors and some of the support enables our Society to continue to support educational endeavors with generous contributions to both the University of Connecticut and the Yale University Orthopaedic Residency Programs.

It is a privilege and an honor to serve our Society and the orthopaedic surgeons of the State of Connecticut. Please contact the Society if we can be of any more direct assistance to you and your practice of orthopaedic surgery.

Annual Meeting Highlights



Honorary Members who received their award at the May 14, 2010, Connecticut Orthopaedic Society's Annual Meeting from left to right, Ms. Patricia Peta, Ms. Maureen Carey, President Brian G. Smith, MD and Ms. Gail Rapoza.

(Photo Credit: Frank Gerratana, MD)

2010 Honorary Members of Society

The Society honored three orthopaedic nurses as honorary members at the Society's Annual Meeting. They were recognized for their significant impact on the profession, patient lives and hospitals they serve.

Gail Rapoza, RN, was nominated by Dr. Bruce Browner for working tirelessly in Hartford Hospital's orthopaedic clinic for over 12 years and as an employee of the Hospital for over 40 years. Her limitless energy, superior performance and caring for each patient as if they were family gained her recognition for the honor.

Ms. Maureen Carey was nominated by Dr. Gary Friedlaender for her nursing skills and compassion that provides a caring and efficient environment for the patients at Yale's orthopaedic clinic. Dr. Friedlaender noted that the busy clinic flourishes under her direction with each patient receiving the attention they deserve no matter what the schedule.

Ms. Patricia Peta was nominated by Dr. Robert Green for her dedication and commitment to the Orthopaedic Clinic at St. Francis Hospital in Hartford, CT. Prior to her years as Director, Mrs. Peta worked in St. Francis Hospital's busy emergency room. Dr. Green noted that it was her dedication, commitment to caring and professional skills that made the clinic a success in the community.

Honorary membership is conferred by the Society's Board of Directors to any individual or individuals who serve or contribute to the advancement of orthopaedic surgeons in Connecticut.

*The Backbone is a publication of the **Connecticut Orthopaedic Society**. Comments and suggestions should be directed to: **Susan Schaffman, Executive Director**
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Foundation Contribution

Please join your colleagues in supporting the future training of the next generations of orthopedic surgeons by making a contribution to the Connecticut Orthopaedic Foundation. Your tax-deductible gift will help make a difference.

Your Contribution Makes a Difference.

Enclosed is my contribution, made payable to the "Connecticut Orthopaedic Foundation, Inc." (Please Print)

Name _____

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I am pleased to support the Connecticut Orthopedic Foundation with a gift of (check one)

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Please send to the Connecticut Orthopaedic Foundation, 26 Riggs Avenue, West Hartford, CT 06107. Your cancelled check is your receipt. **Thank you!**

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In Practice

Is There Ever Justification to Suspend Ethics? by Backbone Contributing Editor - Ron Ripps, M.D., Danbury, CT

"The smell of death was overpowering the moment a relief worker cracked open one of the hospital chapel's doors. Inside, more than a dozen bodies lay motionless on low cots and on the ground, shrouded in white sheets. Here, a wisp of gray hair peeked out. There a knee was flung akimbo. A pallid hand reached across a blue gown."

That was the opening paragraph of Dr. Sheri Fink's outstanding, riveting article on the hurricane that took down New Orleans, *Strained by Katrina, a Hospital Faced Deadly Choices* (*New York Times Magazine* 8/30/09). Dr. Fink is a disaster physician who travels all over the world to give aid in disasters. While she was not at Memorial Medical Center during the Katrina crisis, she was in other parts of the city. She is also a reporter, and when she heard of the events that took place at Memorial, she was drawn in and spent the next three years investigating it.

Although in this short space I could never present the sense of drama and the ethical conundrum Dr. Fink crafted, I hope to pique your interest enough that you will find the article on the web, read it yourself, and contemplate what you might have done under similar circumstances.

The story: Memorial Hospital, owned by Tenet, is situated in one of the low points in New Orleans. A sturdy brick structure, it always served as a safe harbor for the people in that community, who have weathered many hurricanes before Katrina. When in the early morning hours of 8/29/05 Katrina struck landfall, there were 2000 people in the hospital, to include 200 patients and 600 workers. At 5AM the city power to the hospital failed and the hospital's generators kicked in. They did not supply the air conditioners, which shut down. The following morning the streets below became flooded. The Hospital had a disaster plan, but nothing to account for a complete power failure or how to evacuate the entire hospital. It was decided that patients with "DNR" orders should go last. Temperatures soared to 100degrees and the humidity was paralyzing.

The top floor of the hospital had been leased by LifeCare for many years, an outfit that takes critically ill patients in need of 24hr care and tries to make them sufficiently independent so that they can go home rather than remain institutionalized. There were 52 patients, many of whom were on respirators.

In the afternoon of the next day Coast Guard helicopters arrived, landing on the parking facility next door. Since none of the hospital's elevators worked, exhausted hospital workers had to carry critically ill patients down eight flights of stairs and then across to the parking garage, where a pickup truck drove them up to the waiting helicopters. Lifecare staff refused to move their patients until they got permission from their owners in Texas.

Two days after Katrina hit landfall, Memorial's generators failed under three feet of water. 57 patients had been evacuated and 130 remained, to include all the patients on Lifecare. Nurses were instructed to discontinue all but critical treatment. The doctors decided to bring the remaining patients down to the second floor and divide them into three groups: those who were ambulatory were "1's", those who needed assistance "2's", and those who had DNR orders were "3's" and would be evacuated last.

Anna Pou, a 40 year old head and neck surgeon was well-liked among the staff physicians for her work ethic and compassion. Unfamiliar with systems of triage, she simply tried to do the most good with a limited number of resources. Helicopters came and rescued at least some of the Lifecare patients. A few left in boats with family members. When the chief of medicine made the decision as to what should be done for those remaining patients who could not be moved, Dr. Pou went along. The solution involved high doses of morphine. The helicopters stopped coming, and there were gun shots heard in the neighborhood. At the end of the third day police showed up and said the building had to be evacuated by 5PM, after which time they could no longer provide protection.

On the fourth day, Pou was worried they would not be able to get the Category 3 patients out. She stated that she administered injections solely for the purpose of alleviating pain and anxiety. On the seventh floor the decision was made, however, not to leave any living patients behind. Some of the hospital staff strongly objected and refused to participate in "mercy killing". Pou went around with a handful of syringes filled with morphine and midazolam, and, telling patients she was giving them something to make them more comfortable, they died. IV's were started on those who didn't have them.

Another staff member, who supported Dr. Pou, declared, "We were abandoned by the government, we were abandoned by Tenet, and clearly nobody was going to care for these people in their dying moments. I did what I would have wanted done to me if the roles were reversed." Throughout the day boats and helicopters emptied the hospital, which was finally closed at 9 pm. Many of the patients were air lifted to Louis Armstrong New Orleans International Airport where understaffed federal disaster teams could not even provide basic care.

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Annual Meeting Highlights

Thanks to Our Exhibitors

The Connecticut Orthopaedic Society gratefully acknowledges the support of the companies who took part in the Annual Meeting on May 14, 2010.

MAJOR EXHIBITORS

Apple Rehab
Genzyme
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A+Transcription Service
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In Memoriam

It is with sadness that the Connecticut Orthopaedic Society share news of the recent deaths of our colleagues:

Pearce Browning, III, MD - COS Past President

Joseph Slade, III, MD - Yale New Haven

Our thoughts and prayers are with their families and friends.

In Practice (cont. from page 4)

Thirteen days after the storm struck New Orleans, mortuary workers recovered 45 decomposing bodies from the Memorial Medical Center. The following day Charles Foti Jr, Louisiana attorney general, opened an investigation with allegations of patient abandonment and euthanasia. Autopsies were performed and lab tests were debated. A Grand Jury was sworn in. Half the bodies tested positive for Morphine and midazolam. Seventeen were injected before the last rescue effort emptied the hospital- patients who were very ill and probably would not have survived the evacuation. And yet, the community hailed the doctors at Memorial as heroes, and none of the parish prosecutors wanted to take the case for which no one in New Orleans wished an indictment.

Dr. Pou appeared on CBS's "60 Minutes" where she told Morley Safer, "I want everybody to know that I am not a murderer and I do not believe in euthanasia." The following day the AMA issued a statement expressing pride in the professionals who sacrificed and distinguished themselves in the aftermath of Katrina. The parish coroner concluded, "I strongly do not believe she planned to kill anybody, but it looks like she did."

On July 24th, 2007, after 4 months of deliberation, the grand jury acquitted Dr. Pou of all ten indictments against her. In the four years since Katrina, Anna Pou, MD has helped write and pass three laws in the state of Louisiana that offer immunity to health care professionals from civil lawsuits- though not in cases of willful misconduct- for their work in future disasters. The laws also instruct prosecutors to await the results of medical panels before deciding whether to prosecute. Memorial Hospital was never re-opened. Dr. Anna Pou maintains that in disaster situations informed consent is impossible and that it is important to evacuate the sickest patients last. She has given up the practice of medicine and continues to advise state and national medical organizations on disaster preparedness and legal reform as she continues to seek absolution.

2010 Legislative News

The Society was well represented at the Capitol this past session and worked with other specialty societies and the CT State Medical Society on key legislation proposed.

The Society spearheaded an initiative to mandate payment for preauthorized services and procedures. Thanks to the diligent efforts of Drs. F. Scott Gray and Frank Gerratana, the orthopaedic surgeons were viewed as physician leaders in this area. Despite our best efforts and the support of key legislators, the insurance industry proposed final language in the bill that could not be supported by our Society. We requested a withdrawal of the language and hope to gain additional support for this initiative next session.

The revision to the CON process was opposed by the Society and Dr. William Cimino (Society Vice President) provided testimony at the public hearing urging members of the Public Health Committee not to pass the bill. The revisions were extensive and a working group of concerned parties was formed by the Department of Public Health and Commissioner Vogel. Dr. Ross Benthien (Society Secretary-Treasurer), Society lobbyist, Billy Malitsky and staff attended the working group meetings to discuss the issues. In the end, the CON revision language was passed and while certain pieces of it were seen as positive for some physician groups, such as replacement of existing imaging equipment previously acquired through CON does not need to go through the CON; Hospital based surgery centers will now be viewed in the same respect that non-hospital owned surgery centers have been and; existing ASC can expand operating rooms if it is less than two rooms in a certain time period, the Society stands firm that the modifications made to the existing process do not address the issues of cost containment or quality of care; two benchmarks that the CON was initially adopted for 30 years ago to reach.

Two bills passed that will enhance transparency in health insurance claim denials. One will allow employers to access claims paid data of their employees and the other requires health insurance companies report claims denial data which will be published in the annual report card of the Insurance Commissioner.

Those bills that did NOT pass that would have had a negative impact for physicians and the practice of medicine included:

- No physician or hospital tax
- No expansions to scope of practice
- No mandatory Medicaid Assignment tied to licensure

Your Society continues to work on behalf of all orthopaedic surgeons to make certain that a collective voice is heard. For more information,, please contact Susan Schaffman at 860.690.1146 or sasshops@aol.com.

Practice News

AMA Practice Tip: Don't write off claim denials—fight for accurate payment

If your practice submits claims electronically, there's a free tool to help you secure accurate payment from health insurers for inappropriately denied claims.

With the Claims Workflow Assistant, a free online tool from the AMA Practice Management Center, you can look up the reasons health insurers reported for denying claims on the electronic remittance advices (ERAs) you receive. Then, you can determine the best steps for your practice to reverse the denial.

Visit the AMA Practice Management Center Web site at www.ama-assn.org/go/pmc to access the Claims Workflow Assistant. Additional recommended workflows will be added later in 2010.

Status update - CTDEP's Registration of Diagnostic and Therapeutic X-Ray Devices (formerly known as Medical X-Ray Registration).

The due date to register ended April 30th. As indicated in an earlier March mailing from the CTDEP to each registrant, failure to register results in non-compliance with the Connecticut General Statutes 22a-150.

As of June 1st, the CTDEP will be undertaking enforcement actions against those who have failed to register, and the CTDEP will be conducting follow-up inspections at the recalcitrant registrants' facilities. If a facility has transferred ownership, or an X-Ray device has been retired or dismantled and not replaced, it is the registrant's responsibility to complete and submit the Registration Form. The DEP Radiation Division encourages you to register your x-ray devices. The registration fact sheet, instructions and form are located on the DEP website: www.ct.gov/dep/radiation

State of CT - CME Requirement Update

For physicians with registration periods on or after October 1, 2010, the State of Connecticut will require coursework in cultural competency.

To assist you, the AAOS has recently launched an online program, AAOS' Culturally Competent Care Program and is available at www.aaos.org/cc. This education activity is FREE to all AAOS members, including orthopaedic residents. Physicians can earn up to 6 AMA PRA Category 1 CME credits for reading the guidebook and completing the 18 interactive patient cases online. [Log onto www.aaos.org/cc to access the CME program.](http://www.aaos.org/cc)