

FALL 2019

THE message

A Newsmagazine of Spokane County Medical Society

SCMS MEMBER HIGHLIGHT

Thomas P. Schaaf, MD

UW School of Medicine
– Gonzaga University
Launch Collaborative
Leadership Pathway!

Tales of a WSMA First-timer:
The Art of Resolutions





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We urge you to continue to invest in membership at the SCMS.

*You can renew your membership on our website by visiting
www.spcms.org. Your expertise, passion and local engagement are vital
to our profession's growth and success. Thank you in advance for your
membership in the Spokane County Medical Society.*

President's Letter



A YEAR OF GRATITUDE

"Gratitude is a powerful catalyst for happiness. It's the spark that lights a fire of joy in your soul."
– Amy Collette

I'm all for a fire of joy in my soul, so here goes...

Thank you to the members of the Spokane County Medical Society for supporting our local medical community, for giving to your patients in need, and for having the resilience needed

to provide your services. It is not easy. We knew it going in to this profession, and we remember it when we get a challenging patient or have another overwhelming day. And yet how fulfilling to share in the joy and sorrow.

Thank you to the members of the Spokane County Medical Society Board and Task Forces for taking the extra hours out of your life to help shape our local medical environment and have a say in advocating for our profession and our patients.

Thank you to Shelly Bonforti, our Executive Director and she who makes it all happen! Throughout the year she puts on our events, reaches out to our membership, and brings in our partners to support the organization. And she does it all with unbridled enthusiasm!

Thank you to our medical education community. They all play an important role in propagating great patient care and medical integrity for our patients - medical school faculty, residency faculty, physician and physician assistant preceptors, and the resident physicians themselves. 2019 marks an all-time high in the number of medical students, residents, and certainly practitioners in Spokane.

Thank you to our community partners who help our patients get the services they need. From our homeless shelters to our local pharmacies and dentists, our medical network depends on the collaborative action of every member of this community. 2019 also marks a high point in the number and depth of collaborations in our community around healthcare. Many have been enabled by our local ACH, Better Health Together, but others by each of the six universities with a presence in our community, and many more by our individual members.

Thank you to you readers who have gotten this far in this statement of gratitude. My brief one year stretch of being the SCMS President taught me about the importance of community. It's helped me connect with my peers and refresh the connection that remedies the personal sense of burden that modern-day medicine can sometimes give.

The most important one I saved for last. **Thank you to our patients.** Thank you for telling us what you need, for entrusting us to your care, keeping us honest and humble when you are struggling in our healthcare system, and for expressing your appreciation when we get it right.

Thanks everybody ... onward to another year of hills and valleys, adventures and stalls, lessons and teachings, each of which provides material to feed gratitude. ■

Thanks, Deb

Deborah Wiser, MD, 2019 SCMS President



"Mom felt held in warmth, peace and comfort and she wasn't afraid because of that. She had a beautiful ending and that was because of Hospice of Spokane."

– Janice Hughes and Becky Nappi

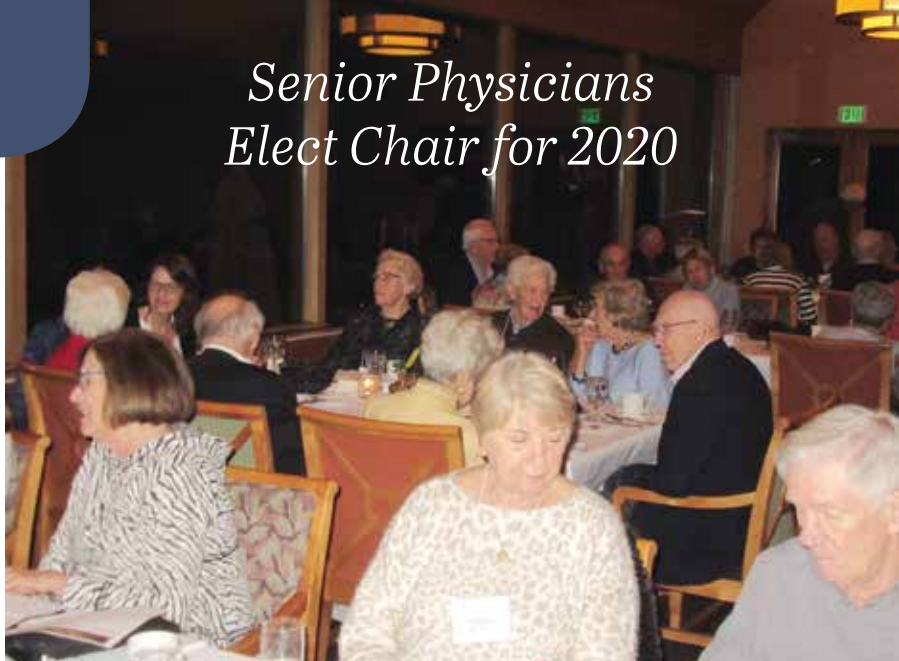


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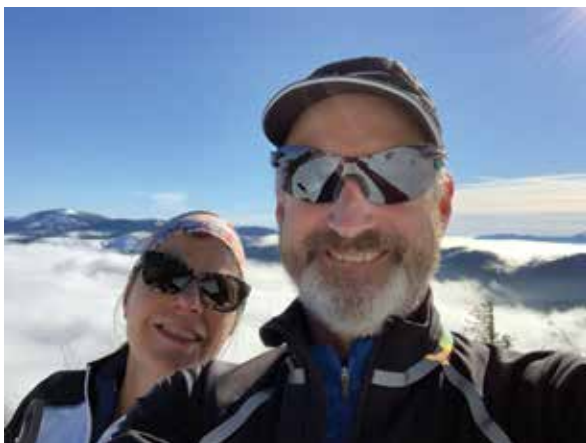
Senior Physicians Elect Chair for 2020

On October 3, 2019, senior physicians and spouses enjoyed an evening of camaraderie and dinner at the Manito Golf and Country Club. The evening began with a moment of silence for the physicians that had passed away over the past year. Following dinner, the business meeting included the election of the 2020 Senior Physicians committee chair, with Dr. Bill Schulte unanimously voted into the position. ■





Thomas P. Schaaf, MD



Works at:

Providence Home and Community Care

Specialty:

Family Medicine

Why SCMS:

I've been part of SCMS for 25+ years. Through all of the interesting twists of health system politics over that time they have been the voice of the local physicians regardless of their employment status or affiliation.

Top concerns in medicine:

For our patients: increasing costs and financial uncertainty.
For our profession: moral distress as we try to navigate all of the barriers to caring for our patients.

Why my specialty:

Family Medicine has been a solid starting point for my various career explorations: Geriatrics, Hospital Medicine, Hospice; and an approach to Physician Leadership that has connections to the whole house of medicine.

When I'm not at work:

Making stuff (bread, beer, woodwork and metal work) and doing stuff (climbing, skiing, biking, running).

Go-to activity to unwind:

Getting outside whenever possible. Riding when the weather is good, and making stuff when the weather is bad.



What I read:

Everything; with a strong mix of sci-fi leavened with history, biography and fiction.

What you might not know about me:

I grew up obsessing over Jacques Cousteau and "Sea Hunt". I really wanted to be a marine biologist until my first job at age 17. That hospital "lab assistant" role turned out to be the autopsy assistant (with a large side of phlebotomy) and I loved working in the hospital.

Proud moments in medicine:

The times I've been able to connect with a patient who has been dismissed as "difficult". I've often encountered people frustrated with the difficulty of getting care, or in distress facing the uncertainty of possible death or disability. It's not only allowed me to make some unusual diagnoses, and helped folks get on (and sometimes off) hospice; I've also met some truly interesting people and learned a lot about the human condition.

Best advice:

Take every opportunity to learn new things, especially when it involves a job offer that sounds crazy but interesting.

What's next:

In Spokane- helping start a PACE program out of the Adult Day Health building across from Holy Family Hospital; and working with the Providence system to improve geriatric care, and improve integration of care across the "continuum". ■

JANUARY**SCMS Foundation Meeting**

January 7, Tuesday, 5:45 pm
Schoenberg Center @ Gonzaga Univ.
Room 302

SCMS Medical Education Committee Meeting

January 22, Wednesday, 5:30 p.m.
Schoenberg Center at Gonzaga Univ.
Room 202

SCMS Board of Trustees Meeting

January 29, Wednesday, 5:30 p.m.
Inland Imaging Conference Room
801 S. Stevens St., Spokane

FEBRUARY**SCMS Executive Committee Meeting**

February 12, Wednesday, 5:45 p.m.
SCMS Office

SAVE THE DATE!**2020 SCMS Annual Reception**

February 19, Wednesday
5:30 p.m.—8:00 p.m.
Spokane Club
1002 W Riverside Ave, Spokane

MARCH**SCMS Board of Trustees Meeting**

March 25, Wednesday, 5:30 p.m.
Inland Imaging Conference Room
801 S. Stevens St., Spokane

APRIL**Spokane Scholar's Foundation Banquet**

April 20, Monday, 6:30 pm
Spokane Conv. Ctr. Ballroom

SCMS Executive Committee Meeting

April 22, Wednesday, 5:45 p.m.
SCMS Office

MAY**SAVE THE DATE!****SCMS Member Mixer**

May 6, Wednesday
5:30 p.m.—8:00 p.m.
Location TBD

WSMA Leadership Dev. Conf.

May 15-16, Friday-Saturday
Chelan, WA

Sr. Physicians Golf Tournament

Date TBD
Manito Golf & Country Club

SCMS Board of Trustees Meeting

May 20, Wednesday, 5:30 p.m.
Inland Imaging Conference Room
801 S. Stevens St., Spokane

JUNE**SCMS Executive Committee Meeting**

June 24, Wednesday, 5:45 p.m.
SCMS Office

JULY**SAVE THE DATE!****10th Annual Summer Member River Cruise**

July 9, Thursday, 6:00 p.m.—9:00 p.m.
The Serendipity, Templin's Marina

SEPTEMBER**SCMS Board of Trustees Meeting**

September 16, Wednesday, 5:30 p.m.
Inland Imaging Conference Room
801 S. Stevens St., Spokane
(HOD Caucus)

SAVE THE DATE!**Medicine 2020**

September 25, Friday, 7:00 a.m.—5:00 p.m.
Historic Davenport Hotel

WSMA House of Delegates

September 26—27, Saturday-Sunday
Historic Davenport,
Autograph Collection, Spokane

OCTOBER**SCMS Executive Committee Meeting**

October 21, Wednesday, 5:45 p.m.
SCMS Office

SCMS Sr. Physicians Dinner

Date TBD, 5:00 p.m.
Manito Golf & Country Club

SCMS Nominating Committee Meeting

TBD

NOVEMBER**SCMS Board of Trustees Meeting**

November 18, Wednesday, 5:30 p.m.
Inland Imaging Conference Room
801 S. Stevens St., Spokane

DECEMBER**SAVE THE DATE!****SCMS Member Mixer**

December 2, Wednesday
5:30 p.m.—8:00 p.m.
Location TBD

SCMS Executive Committee Meeting

December 16, Wednesday, 5:45 p.m.
SCMS Office

If you have any questions regarding an event, please call SCMS
at (509) 325-5010 between 9:00 am and 5:00 pm,
Monday through Friday, or email shelly@spcms.org.



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Hakan Kaya, MD
Medical Oncologist & Hematologist

SCMS Members and their Families Volunteer Time to 2nd Harvest

SCMS members and family volunteers participated in sorting and repacking food in our local community on October 21, 2019, with 2nd Harvest's FAMILY Help the Hungry Sort Night! The sort room is reserved for families with children on Family Nights where you and your family can help hungry people in our community.

"Fighting hunger, feeding hope: Second Harvest brings community resources together to feed people in need through empowerment, education and partnerships." ■



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ALFRED J. DERBY, MD

(July 1933-August 2019)



Alfred James Derby, 86, of Colbert, WA passed away August 12, 2019, of a spinal cord injury resulting from a fall down stairs at home. He was born in Seattle, WA on July 14, 1933. Al graduated from Walla Walla High School in 1951. He received his Bachelor of Arts degree in Zoology in 1955 and his Doctor of Medicine degree in 1959, both from the University of Washington. He completed his internship at

Minneapolis General Hospital, where he met Marlyn Ann Blauert. They were married on August 27, 1960, at Zion Lutheran Church in Detroit Lakes, Minnesota. The Air Force deployed him to Guam shortly after the wedding, and the couple lived there 1960-1962.

He completed his residency in Obstetrics and Gynecology at Letterman General Hospital in San Francisco 1962-1965. He served at Fairchild Air Force Base 1965-1968. After his honorable discharge, he went into private practice in Spokane until he retired in 2005.

He and Marlyn raised two children. He had a strong faith in Jesus and lived his faith in his deeds. Active in the Pro-Life movement, he donated hundreds of hours of free medical care to mothers in need. He built a log cabin using trees he harvested from the land in the 1970's. This cabin and subsequent "projects" remained his favorite hobby throughout the rest of his life.

He also enjoyed backpacking, hunting, snowmobiling, fine wines, and falling asleep watching the Mariners. He particularly found satisfaction in activities with a tangible yield, such as logging, woodworking, and household repairs. His favorite tools were his chainsaw and his bulldozer. Even gnarly from arthritis, his hands were amazingly productive. Generous to a fault, he always wanted to help and share. He will always be loved and remembered by those he left behind. He is survived by his two children: Lynn Derby Fuzak, Lance Alfred Derby, and their spouses; his grandson; his step-grandson; his brother; his sister-in-law; and numerous nieces, nephews, grandnieces, and grandnephews. Memorial contributions are suggested to Life Services of Spokane <https://lifeservices.org>, where Al donated countless hours to help save mothers and their babies. ■

DR. RONALD LEE VINCENT

(April 1937 – October 2019)



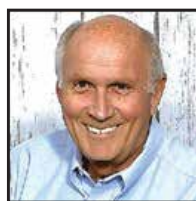
Dr. Ronald Lee Vincent first came to Spokane in 1963 from Dennison, Texas after receiving his bachelor's degree from Baylor University and medical degree from the University of Texas Southwestern Medical School. He started his internship at Deaconess Hospital, where he soon met and married his wife of 55 years, Patricia Lee Clatchey (Patti). Following

his internship, Ron and Patti traveled back to Texas where he served as a Captain and Doctor at Reese Air Force Base in Lubbock. From 1964 to 1971, Ron and Patti lived in Pittsburgh, Pennsylvania where Ron completed his residency in neurological surgery at the University of Pittsburgh Medical Center.

His love for the Pacific Northwest brought Ron and Patti back to Spokane in 1971 to raise their family and start his practice at Neurological Associates. Ron passed away peacefully at home on Thursday, October 3, 2019. He is survived by his wife Patti; daughter and son; and four grandchildren. He is also survived by his sister and brother, and many nieces and nephews. The family extends their sincere thanks and gratitude to the wonderful care given to Ron by Senior Helpers, Kindred at home and Hospice of Spokane. Patti and family look forward to celebrating Ron's life at a later date. ■

DR. MICHAEL L. EATON

(April 1945 - October 2019)



Michael L. Eaton, M.D. died on October 12, 2019, from a massive brain bleed. He died peacefully surrounded by his family. He was born in Coffeyville, Kansas on April 30, 1945, and grew up in Helena, Montana, from age two. He played guard for the Helena High School football team, liked to hunt with his friends, and trap shoot with his dad. In 1962 he

was named to the All-American Junior Trapshooting team. That was the pinnacle of his many championships. He often broke 96/100 targets at competitions.

He studied pre-med at Montana State University ('67) and then attended medical school at the University of Kansas ('71). He married Kathy Chilton on August 3, 1968. After graduation the family moved to Spokane. Mike did his internship and radiology residency at Sacred Heart Hospital. In 1975 he reported to Fort Leavenworth Kansas for two years of military service. In 1977 Mike began a 33-year career at the Rockwood Clinic as a radiologist. He enjoyed the challenge of his work and was lucky to have many great colleagues.

He retired in 2008. Family activities, lots of golf, barbequing, yard maintenance and travel brought him happiness and contentment in retirement. Whenever the weather allowed, he could be found "working" on one of the many local golf courses with his golfing buddies. Enjoying a cocktail on his patio with family and friends on a warm summer evening made him very happy. In recent years Mike had a deep appreciation for how fortunate he had been throughout his life and enjoyed the fullness of life with his family and friends. He died a very happy man. He is survived by his wife of 51 years, Kathy; four children; nine grandchildren; his sister his brother. ■

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Membership Recognition

Thank you to the members listed here. Their contribution of time and talent has helped to make the Spokane County Medical Society the strong organization it is today.

OCTOBER

60 YEARS

Ian Napier, MD
10/08/1959

50 YEARS

Alan B. Mackay, MD
10/28/1969

40 YEARS

Floyd M. McCaffree, MD
10/23/1979

20 YEARS

Kurt P. Fine, MD
10/01/1999

Michael J. Fay, PA-C
10/06/1999

10 YEARS

Juan F. Bala, III, MD
10/01/2009

Sanjay Logani, MD
10/01/2009

NOVEMBER

40 YEARS

William C. Bond, MD
11/27/1979

Michael S. Carlson, MD
11/27/1979

10 YEARS

Brian W. Rich, MD
11/18/2009

T. Daniel Dibble, MD
11/19/2009

Jamie L. Lewis, MD
11/19/2009

DECEMBER

50 YEARS

James M. Anderson, MD
12/09/1969

Carl F. Brunjes, MD
12/09/1969

Lawrence T. Garvin, MD
12/09/1969

Henry W. Gerber, MD
12/09/1969

40 YEARS

Donald F. Condon, MD
12/18/1979

Christopher L. Bogarosh, MD
12/18/1979

Patrick O. Tennican, MD
12/18/1979

20 YEARS

Robert L. Cross, MD
12/3/1999

Eric A. Sohn, MD
12/15/1999

10 YEARS

Jeffrey D. Colburn, MD
12/21/2009

Welcome, New Members

October 2019

PHYSICIAN ASSISTANTS:

Dula, Suzan, PsyD, PA-C
Currently practicing at
Neuroeducation.



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Spokane Regional Opioid Taskforce

The Spokane Regional Opioid Taskforce (SROTf) has completed its first year of collaborative efforts since the October 2018 summit that brought together over 60 people from more than 40 organizations. Since that time, the taskforce has created a strategic plan, held a community event attended by approximately 250 people, hosted a one-day provider conference attended by 60 providers, and launched a website, <https://drugpreventionspokane.org>. The website has a section specifically dedicated to helping providers find treatment options for their patients, access to DEA waiver trainings in order to be able to prescribe medication assisted treatment (MAT) to opioid addicted patients, access current prescribing guidelines, and link with online provider peer support networks from across the state and country.

SROTF has several plans for 2020 and hopes to strengthen its connections with the medical community in order to have an impact. The taskforce is looking to expand Spokane County's capacity to provide MAT. MAT is a well-documented, evidence-based practice for opioid treatment. Multicare and Providence hospitals are starting to implement protocols for initiating MAT in the emergency departments (EDs). EDs are beginning to prescribe Buprenorphine to Individuals with opioid use disorder (OUD) who are in the ED because they are seeking drugs or access to treatment. However, this is only an initial treatment step, as the prescription is limited to a three-day supply. ED nurse care managers are working diligently to connect newly initiated patients into longer-term care, which is critical for their success in recovery.

By increasing the number of MAT providers, SROTF seeks to strengthen the continuum of care for individuals with OUD in order to have a measurable impact on the opioid crisis in Spokane. The taskforce, nevertheless, recognizes providing MAT is not without its challenges, as these cases are often complicated by many psychosocial issues: polysubstance misuse/abuse, co-occurring disorders, pain management needs, and additional medical



comorbidities caused by drug abuse and care neglect. SROTf is working on a number of projects in order to address providers' concerns regarding treating individuals with OUD.

One project to support providers addresses non-opioid pain management (NOPM). There is a growing body of evidence of the efficacy of chiropractic care, physical therapy, yoga therapy and massage therapy for NOPM. SROTF is implementing a pilot program to test a scripted, shared, decision-making process to introduce non-pharmacological pain management options to adults who are prescribed opioids. The working hypothesis is if individuals are introduced to non-medical means to manage their pain, they will be willing to try other options and thereby lessen their reliance on opioids. The results of the pilot study will be shared with providers, as well as the protocols used if found successful.

For more information about the efforts of the SROTF or to get involved, contact Heidi Wilson at hwilson@srhd.org or 509-324-1568. ■

Hepatitis A

By Dr. Bob Lutz
Health Officer | Spokane Regional Health District

BACKGROUND

Hepatitis A is a vaccine-preventable, communicable disease of the liver caused by the hepatitis A virus (HAV). It is usually transmitted person-to-person through the fecal-oral route or consumption of contaminated food or water. Hepatitis A is a self-limited disease that does not result in chronic infection. Most adults with hepatitis A have symptoms, including fatigue, low appetite, stomach pain, nausea, and jaundice, that usually resolve within 2 months of infection; most children less than 6 years of age do not have symptoms or have an unrecognized infection. Antibodies produced in response to hepatitis A infection last for life and protect against reinfection (<https://www.cdc.gov/hepatitis/hav/index.htm>). Vaccination is the best means to

prevent infection. The two-shot series is recommended for children between the ages of 12-23 months, for populations at risk (people experiencing homelessness, incarceration, who use drugs, who have chronic liver disease, and men who have sex with men), and for international travel to endemic countries.

NATIONAL

In 2016, two food-related outbreaks occurred, resulting in 2007 cases. Since then, outbreaks have continued to occur in 30 states across the United States. As of November 22, 2019, 28,466 cases have been identified with a hospitalization rate of 60% and a mortality rate of 1%. (<https://www.cdc.gov/hepatitis/outbreaks/hepatitisaoutbreaks.htm>) These have primarily occurred in adults in at-risk populations – people who use drugs, experience homelessness and among men who have sex with men. ■



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Angela Chien, MD
Obstetrics & Gynecology
Kirkland, WA



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On October 25, 2019, SCMS sponsored their annual CME event, Medicine 2019, at Rockwood South Hill Event Center. The program focused on the more challenging management issues that clinicians encounter. The sessions were very informative, and the event was well attended. ■



We would like to thank the event major supporters for helping make this day a great success!



UWSOM Student Anna May, Explored Reducing the Suicide Rate Among Native Americans during Her Month-Long Stay on the Spokane Indian Reservation

*May, who is of Navaho and Laguna Pueblo heritage,
called her time on the Reservation “eye-opening.”*

By Cindy Hval

Anna May has wanted to be a physician for as long as she can remember. “I had a little doctor kit as a child,” she recalled. “My dream was to attend the University of Washington School of Medicine and become a pediatrician.”

Part of her dream has already come true. After earning her undergraduate degree in biology from Gonzaga University, May was accepted into the UW’s medical school.

However, prior to her acceptance, her dream had shifted. “While in high school I worked at the Seattle Indian Health Board clinic, shadowing a family medicine physician,” she said. “I’d never been in an Indian Health Services (IHS) clinic. I saw how cultural competency was very important to the native community.”

That experience so resonated with her that she applied to UWSOM’s Indian Health Pathway (IHP), a program founded in 1992 that provides a path for medical students interested in becoming medical providers in urban or rural indigenous communities.

And that’s May’s desire. “Growing up I always had to explain being an Indian, as many people have never met a Native American person, so they have stereotypical ideas of Natives living in teepees, passing peace pipes, wearing buckskin and headdresses, and living on reservations,” she said. “At IHS clinics, people understand that Natives come from many different tribes and live just as any other 21st century American, so no explanations were needed. I got to see firsthand the difference that cultural knowledge and sensitivity make in the native community.”

The experience led her to choose a focus on family medicine. May received more firsthand experience this summer while doing her RUOP (Rural Underserved Opportunities Program) project in Wellpinit, a town of approximately 700, located 50 miles northwest of Spokane on the Spokane Indian Reservation.

Since its inception in 1989, more than 1,200 RUOP public health projects have been developed in communities across the WWAMI region (Washington, Wyoming, Alaska, Montana, and Idaho). These projects require students to partner with community organizations to address one of a spectrum of community health issues including childhood obesity, anti-violence campaigns and senior exercise programs.

John McCarthy, M.D., Assistant Dean for Rural Programs for UWSOM, was delighted that May was able to work in Wellpinit. “Anna is very thoughtful and personally engaged,” he said. “She understands this world at a deeper level than most of us.” Indeed. May’s RUOP project proved personal.

“I looked at how to decrease the suicide rate on the Spokane Indian Reservation through culturally competent, community-oriented

prevention,” she said. “I know about the high suicide rates in the Indian community. I have friends who live on reservations, and I’ve struggled as an urban Indian with my own cultural identity.” Which is why McCarthy appreciated her involvement in Wellpinit.

“She understands the impact of cultural trauma and the unique set of issues that are inherent in colonized peoples,” said McCarthy, who also works at the NATIVE Project in Spokane, one of the state’s two Urban Indian Health Clinics. “It was very powerful to have her there.” During her time in Wellpinit May learned that Stevens County where the Spokane Indian Reservation is located has the second highest suicide rate in Washington.

May evaluated the assets in the community, and assessed how they could be used to address the issue. “The Children of the Sun Prevention Coalition is an action-oriented community organization that fills gaps in tribal services and strengthens current community assets,” she said. “It’s an amazing program, but limited in terms of funding.”

She found that substance use prevention closely aligns with suicide prevention as both focus on the development of life skills and promote awareness, community relationships, and a strong cultural identity.

Her time on the Spokane Indian Reservation furthered her desire to practice family medicine in a native community.

“It was eye-opening,” said May. “Growing up, my pediatrician was a woman of color. I never questioned that I could do this. Now, I want to be an example to Native American youth, so they can see medicine is a path open to them.” ■

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UW School of Medicine – Gonzaga University Launch Collaborative Leadership Pathway!

By Darryl Potyk, MD, FACP

Associate Dean for Eastern Washington

University of Washington School of Medicine

Chief of Medical Education

University of Washington – Gonzaga University Regional
Health Partnership

Associate Program Director

Providence Internal Medicine Residency - Spokane



Whether involved in formal leadership roles or not, physicians are seen as leaders in their communities. In order to confront the challenges facing modern healthcare experts and organizations, including the Institute of Medicine, American Association of Medical Colleges, and Accreditation Council for Graduate Medical Education have called for an increase in physician leadership capabilities. UWSOM-Spokane is collaborating with Gonzaga

University's School of Leadership Studies to deliver a longitudinal curriculum that includes foundational leadership skills as well as experiential and reflective components. Matt Hollon, MD, and Darin Eckert, MD, from the UWSOM-Spokane faculty along with Rachelle Strawther, MA, from the Gonzaga University School of Leadership studies are overseeing this effort.

Last year, UWSOM in conjunction with GU applied for and received financial support from the SCMS Foundation. Those funds were instrumental and served as seed money to get the program up and running to provide formal leadership training for medical students in conjunction with the Gonzaga University School of Leadership Studies. This seed money helped demonstrate to our respective

institutions our deep commitment to providing leadership education to our students in a collaborative, mutually beneficial manner. It also led to further financial commitments for this program from both UWSOM and GU. As a result we launched our leadership pathway this fall!

While UWSOM emphasizes leadership for all students, fifteen students signed up for the inaugural year of this 4-year longitudinal curriculum that focuses on a more intensive development of leadership skills. During the first 18-months they will learn about their own strengths and weaknesses as well as their personal leadership style. Students will go on to learn how to lead and influence others as well as conflict resolution skills. During their clinical years, the students will have experiential learning within their clerkships as well as serving in meaningful leadership roles as student representatives on various committees serving the healthcare professions. As the program moves forward, we are looking to expand the number of Spokane-based UWSOM medical students participating in this intensive program.

The collaborative efforts of two highly ranked universities, University of Washington and Gonzaga University, to bring formal instruction in fundamental leadership training and skills to the next generation of physicians is remarkable. Spokane and Eastern Washington will benefit from having these physician leaders in our communities. We appreciate the support we have received from the SCMS Foundation to further this important aspect of physician training. ■

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Tales of a WSMA First-timer: The Art of Resolutions

**By DawnElise DeWitt MD, MSc, MACP, FRACP, Cert Med Ed
Professor & Senior Associate Dean, CIPHERS*
Inaugural Director Year 4
Elson S. Floyd College of Medicine**

When you feel strongly about something, and want to make a difference in your profession, there are many ways to contribute. This year I found myself angling for a way to reduce the credentialing burden on our medical students.

Every time students want to spend any time in a (different) clinical environment, they must re-up their vaccinations, police check, drug tests, HIPAA sign off, mask fit testing, TB testing....and so on. The result is that students at both ESFCOM/WSU and UW are literally spending weeks of time and reams of paper completing largely repetitive/redundant documentation.

Having spent weeks of my time trying to discuss this with sympathetic CMOs in the region, the answer often comes back, "But we have to do this for our hospital accreditors...". So, I looked for bigger guns—and thought the SCMS and the WSMA would help with support and power!

So, how to write a resolution for discussion and adoption? First, read other resolutions—definitely interesting reading—so that I could copy the format. Our own Shelly Bonforti was very helpful making sure I dotted my "i"s and crossed my "t"s. Once we had the

format down, the next hurdle was review and approval by the SCMS board of trustees. The board (me included) spent a long evening reviewing all of the resolutions for the annual meeting, discussing our viewpoints and deciding whether or not we would support each individual resolution or vote against it (or proposed changes). Once it got to the WSMA docket, it was scheduled for a "late" adoption (my first time meant I wasn't "in time"). I discussed the resolution with the student reps, since it was about them, and then went to the microphone to briefly ask that it be included in the annual meeting agenda. Moved, Seconded and "all in favor" became "Aye."

The next step was to have the resolution discussed on the floor in order. I found myself holding my breath during the vote—and now, the resolution has been "adopted" for support. So, months later I find myself with the WSMA behind us with at least some support and more visibility. Wish us luck!

Finally, if there is an issue you care about, first search the web to see if someone has already tried to address it at WSMA, if not... the SCMS and WSMA are great groups to help us advocate for ourselves as physicians (and PAs are included). ■

Happy New Year to all!

Dr. Dawn DeWitt MD,
newbie resolution-maker no longer

Two Resolutions Regarding Equal Rights in Washington state for LGBTQ+ Community, Passed in House Delegates Meeting

We entered medicine to help our patients, improve communities, and advocate for social justice and health equity. As medical students, these ideas which attracted us to the field can often feel distant or lost amongst the classwork. Last year, we attended an event hosted by our local WSMA student representatives and associated faculty members where they outlined the role of the WSMA, how its members effect change, and how we as students can be involved in advocacy and their resolution-writing process. Both of us were immediately energized by the possibility of writing a resolution that could potentially make the field of medicine in Washington State more accessible for more people. For us, we were especially interested in increasing the accessibility of medical facilities and providers for members of the LGBTQ+ community.

Over the summer, we set aside a few days to research and write two resolutions. The first resolution outlined recommendations for improving healthcare experiences for transgender and gender nonconforming patients that should be applied to all healthcare facilities throughout Washington. The second resolved that the WSMA will actively oppose any legislative actions that attempt to limit the rights and access to gender-affirming healthcare services by LGBTQ+ patients. We are very thankful to Dr. Clint Hauxwell for his mentorship and guidance throughout the writing process. He connected us with Dr. Monica Blykowski-May, who graciously and enthusiastically agreed to sponsor our resolutions and was a wonderful support to us throughout the actual House of Delegates meeting in SeaTac.

Both of us were a bit worried about how our resolutions would be received by the WSMA members. We were quite surprised to find a

room full of physicians of all ages that were excited and passionate about what we had proposed. We introduced the resolution as co-authors and others stood and spoke to the committee chairs in favor of it, too! The committee recommended our resolutions be adopted, and sure enough they were adopted the next day at the final House of Delegates meeting.

Overall, the process was incredibly accessible and extremely rewarding. We already have plans to write additional resolutions for next year and strongly encourage other medical students in Washington to get involved.

As a WSMA member and the sponsor of these two resolutions, I felt incredibly proud of the commitment, energy and courage Taylor and Patrick showed throughout this process. Physicians/providers should feel accountable for the health and health-equitable experience of the people in our communities. The WSMA provides an organized structure for providers from all around the state to work together to advocate for how these principles are implemented in our practices. I am gratified and inspired that our new colleagues are engaged and dedicated to working together to improve our patients' health and hope that other students and providers consider how they may similarly participate in these leadership activities. ■

Taylor Bozich
Patrick Throckmorton
Monica Blykowski-May MD, MBA, CPE



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