

**et Adieu** As the end of the year approaches, I am submitting my last article as president of the Dallas County Medical Society for the Dallas Medical Journal. I am sure that for some there is a sense of relief that I have written the last of my obnoxiously long President's Pages. I suppose it also is true that Lauren and Tracy at DCMS are heartened knowing that they will have more free time because they won't be devoting hours upon hours to my obsessively endless rewrites. There probably will be fewer trees sacrificed and less computer memory occupied. Sorry, gang, but you inspired me; at times I just could not help myself!

To my surprise, I have found that serving DCMS as president has been the most rewarding aspect of my career as a physician. I am not making that statement lightly! Little did I suspect before the year began what an impact the society could make in the lives of the residents of Dallas County. The spotlight on our vision statement "to promote a healthy community" has never been brighter. And I think you'll agree that through our involvement with West Nile virus, the 1115 Waiver and Medicaid expansion, the evolution of the North Texas HIE, and our support of Parkland, our DCMS mission statement "to advocate for physicians and patients," is being fulfilled. Our successes are breathtaking.

But we are successful only because we, the physicians, get to work daily with those crazy characters at the society — particularly Michael, Connie, Tracy, Deanna, and Lauren (sounds like a reincarnation of the Mickey Mouse Club). Before serving as president, I never knew what a talented, energized and devoted crew we have working for us at DCMS. Their dedication to the society is unparalleled with 10-, 15- and 20-year employment anniversaries the norm. This is even more impressive when you consider how much more their talents are valued monetarily at other locales, yet they choose to sacrifice, giving of themselves to serve the Dallas community through the society. They are my inspiration.

I also have been galvanized by working with such incredibly engaged physicians at DCMS who serve as my model for exceptionalism in physician advocacy. Dedicated doctors such as Shelton Hopkins, Cynthia Sherry and Jeff Janis epitomize that need in all of us to serve and give back to the

medical community. John Carlo, Wendy Chung, Bob Haley, and Jim Luby, you are my heroes for your contributions to mitigate the West Nile virus crisis. Because of your efforts, lives were saved, scores of patients were spared the horrors of brain damage, and some grandparents will get to know their grandkids. Jim Walton represents a beacon of hope, championing innovative pathways to healthcare access for the 30 percent who are uninsured in our county. Still, other physicians work dependably and relentlessly every day in the trenches of healthcare legislation. Lisa Swanson, Lee Ann Pearse and Bob Gunby are a few of the physicians pushing all of us toward excellence in legislative advocacy.

### Simply the Best

The combination of the DCMS staff and the physicians makes a formidable team. No county medical society in the state of Texas, let alone the country, tackles as many complex and intricate projects as does ours, and with as much alacrity and skill. No other county medical society would have dared interject itself into the politics of the West Nile virus crisis, triggering a successful collaboration and intervention with the county, resulting in the saving of an incalculable number of citizens from permanent neurological impairment and worse. To quote Dallas County Judge Clay Jenkins, "When I called DCMS, they were like medical Minutemen! They were essentially an outreach of my office." No other county medical society has the vision and innovative creativity to create a Project Access Dallas, serving thousands of uninsured patients in our community, and then transform that program into an 1115 Waiver program, My Medical Home. No other county medical society has the tenacity and determination to overcome political inertia and successfully drive a regional HIE to completion.

One does not get the true sense of the depth and breadth of the activities that constantly are churning at DCMS merely from reading the monthly journal or regular e-mail communications. If I have one criticism about Michael and his band of merry women (and now a few men), it is that they do not do a good job of tooting their own horn!



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Michael Darrouzet, Connie Webster, Tracy Casto, Lauren Cowling, and Deanna Wooten

Michael, let's work on this one! It is not until a physician gets involved on the board level does one get a real appreciation of the value of DCMS and the magnitude of the healthcare community's dependence on and respect for DCMS. We truly are fortunate and blessed to work with such outstandingly inspired and passionate individuals. We are the envy of the state.

During my presidential installation speech in January, I noted that I don't do humble well. After this year, I can safely report that this surely has changed. Working with the physicians, Michael, and the incredibly talented and dedicated individuals at DCMS truly has been a humbling experience — one for which I have been deeply honored. Thank you, one and all!

The two pieces of advice that I have for Cynthia Sherry, our incoming president, and Jeff Janis, our president elect, are that if Michael promises you that the president's job is really not that hard or time consuming, and that after June it is all smooth sailing — don't believe him for a minute. A greater example of false advertising does not exist. After all, mosquitoes and the number 1115 were never on my radar screen. And if Connie texts you on a Sunday morning with the message, "We have a problem and need to talk, please call!" think twice about doing so! It is not welcome news and your free time and life are about to change dramatically!

OK, just kidding. Here comes the real stuff.

## **"To Advocate for Physicians and Patients"**

This is my vision, through not only words but also an image of the truly complete enlightened physician. Throughout the year, interspersed within my President's Pages, I have touched upon this ideal. And it literally is etched in stone. As you walk into the entrance of my specialty society's headquarters in Washington, DC, you are confronted with this new reality carved into the wall: "Quality care through science, education, and advocacy." The advocacy piece is the most important. As I stated in my installation speech, my goal for the year was to try to make physicians uncomfortable. That is, to get them out of their comfort zones as clinicians grounded in science and education. I stepped out of my comfort zone when I had to step into the political arena and advocate for Dallas County residents by presenting information about killing mosquitos to the Dallas County Commissioners Court, various city councils, scores of mayors, and in live radio and TV interviews. It was a little nerve racking because, as a private practice cardiologist, it had been at least 25 years since Jim Luby had taught me about arboviruses and *Culex sapiens* *Quinquefasciatus*. (Now try saying that one 10 times fast! Which reminds me ... Michael, can I apply for CME for all that West Nile virus research I did?) It was through advocacy that the tide was turned and the correct decision for aerial spraying was made. The science and education pieces were

not getting it done. The lives that were spared the ravages of West Nile virus, through advocacy, are the result of the most satisfying role I could have performed as a physician.

## **"Above God and the Law"**

Several years ago, Frank Lutz administered a poll of Americans to learn which professions they considered the most credible. At the top, by a significant margin, were nurses and physicians. We were far above judges, legislators and the clergy. Mr. Lutz proclaimed, rather dramatically, "In our society, you doctors are above God and the law!" We need to use that. We need to leverage this "coat of credibility," as he called it. We have much more to offer than science and education. People want to know our opinions on a whole range of societal issues, especially healthcare reform. And they want us to fight for them. Society looks to us to lead, so let's lead! The stakes could not be higher. The Affordable Care Act is merely a broad guideline. Nowhere in the document were P values, confidence intervals or guidelines referenced. The vast majority of decisions about how healthcare reform will manifest in our communities are yet to be determined from both the regulatory and legislative perspective. At both the state and federal levels, we need to be at the table and be involved.

There is an old vision of the physician as an advocate for his or her patient. This has to mean much more than just words. To quote the American College of Physicians' Ethics Manual, "Physicians have an opportunity and duty to advocate for the needs of individual patients as well as for society." This ideal is echoed in our DCMS mission statement, "to advocate for physicians and patients, to promote a healthy community." This is our version of the well-know mantra "to protect and to serve." This is the one area (and I mean only one!) where we physicians need to be much more like lawyers. Yes, yes, heresy, I know! Yet, it is admirable how attorneys will be a part of the political process, almost as if it becomes a part of their genome when they complete law school. In fact, the root derivation of the word "advocate" means lawyer, or legal counsel. The reality is that, as physicians, we will have just as much impact on the health care our patients receive by working in legislative chambers and boardrooms as we do practicing in exam rooms and operating suites. As clinicians we treat one patient at a time, but as physician advocates, we can help an entire state or country, all at once.

Through DCMS and our role as physician advocates for our patients, timely access to quality cost-effective health care is within our reach, and our shared vision of a healthy community is in sight.

Adieu, et a la prochaine! **DMJ**

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