



### November 2010 Fall Edition



# Connecticut PA

A Publication of the Connecticut Academy of Physician Assistants

### PRESIDENT'S MESSAGE

By: Justin Champagne, PA-C

Over the past few years, the Connecticut Academy of Physician Assistants (ConnAPA) has forged multiple relationships with the physician organizations of the state. Recently, we continued to strengthen our relationship with one of them in particular and it paid dividends to both.

On October 13, 2010, ConnAPA exhibited at the Connecticut State Medical Society (CSMS) Annual Meeting. There are actually ten physician assistants (PAs), who over the past few years, applied for membership and were voted in as Associate Members in CSMS. Not many other states in the country have this type of set up, but CSMS and ConnAPA realize the value of working together. By exhibiting at their meeting, we not only showed support to our supervising physicians but we also made evident our great working relationship to both pharmaceutical and product representatives. There was a multitude of vendors in the exhibit hall and having PA representation there helps promote the idea of the MD/PA team concept.

In addition to the intangibles of promulgating the MD/PA team approach to health care and strengthening our collegial relationship, ConnAPA also walked away with some tangible benefits as a result of attending the meeting. We were able to set up a meeting with their legislative committee to discuss joint efforts as the next legislative session approaches. It should come as no surprise that having physician backing when going to the Legislature is extremely helpful, as we know very well when the CSMS and the Radiological Society of Connecticut (RSC) helped us with the fluoroscopy bill a year ago. We were also able to confirm a keynote speaker for our annual Charter Oak Conference (COC) in April 2011, an event at which the CSMS reciprocates and exhibits. We then made contacts with some of the other exhibitors who said they would be willing to exhibit at COC for us and perhaps enter into some member benefit type of programs (i.e. Verizon). Lastly, we were made aware of a program that the CSMS has that provides prescription discount cards to patients who have no prescription coverage (see separate article on this topic).

ConnAPA was able to achieve a lot at this meeting but was also able to offer some help to others as well. A handful of physicians came to the booth to tell us that their sons or daughters want to be PAs, so we were able to answer some of their questions and direct them to some resources to help them along in their efforts. Even more physicians came up to us to tell us that they "love PAs" and that their practices are better because of PAs. I would like to thank Tricia Marriott, PA-C and ConnAPA's (Continued on page 2)



Justin Champagne, PA-C

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### PRESIDENT'S MESSAGE

*(continued from page 1)* 

Executive Director, Michael Thompson, who attended the exhibit with me.

All in all, we left the meeting feeling very satisfied with what was accomplished that day. We can feel confident that this profession, even in the tough economic times, is firmly entrenched and will only grow further. If you haven't seen it already, CNN Money.com again rated the PA profession as the #2 career with great pay and growth prospects, estimating that the 10-year job growth will be 39%. It's a great time to be (or want to become) a physician assistant.

### PEDI NOTES: PART II

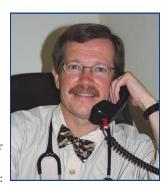
By: Brian T. Maurer, PA-C

Over the course of my 31-year career in ambulatory pediatrics, I've learned that Art Linkletter's words ring true: kids say the darndest things.

\* \* \*

Some parents pride themselves in their command of medical terminology.

One time I saw a pre-teen for a sore throat. As I peered into her mouth, holding her tongue down with a wooden stick, her mother's voice sounded from the back corner of the exam room: "Hey, doc; how does her vulva look?"



"Well," I said, "it's hard to tell from this angle."

\* \* :

An 8-year-old boy came to the office with his mother for a routine examination. "Could he give us a urine specimen?" the medical assistant asked the mother.

"Do you have to pee?" the mother asked the boy. He nodded.

"Here's a cup," the medical assistant said, handing the boy a plastic specimen collection container. "The bathroom's right around the corner."

The boy disappeared behind the bathroom door and emerged two minutes later with a dry specimen cup. "I didn't need it," he said, handing it back to the medical assistant. "There's a toilet in there."

\* \* \*

"How did school go for you last year?" I asked a 16-year-old boy at his yearly physical exam.

"I failed history," he told me. "Now I have to take it again this year."

"You exemplify the well-known aphorism of the writer George Santayana," I said. "Those who can not remember the past are condemned to repeat it."

\* \* \*

"Is he taking any medications?" I asked the father of an 11-year-old boy.

"He takes medicine for his allergies," the father told me. "Zyrtec and some sort of nasal spray—I think it's Flomax."

"Flonase?"

"That's it!"

I suspected that the boy might be a bit young for prostate problems.

### WHO SAYS?

### By: Tricia Marriott, PA-C, MPAS

### Dispelling the Myths and Misinformation Surrounding PA Regulations

Physician assistants generally just want to take care of patients. However, many regulatory forces that affect a PA's ability to practice extend beyond state laws for supervision and scope of practice. Consider these common myths: "PA charts need co-signatures"; "PAs cannot see new patients or patients with new problems"; "PAs cannot order respiratory therapy"; "PAs cannot perform consultations"; "PAs cannot bill above a Level 3 code"; and "PAs cannot take call."

All practitioners, including PAs, must determine what rules apply to them where, what impact the rules have on their ability to practice, and what they can do to ensure compliance.

The list of policies and regulations seems endless. (See diagram, page 9.) Federal and state law, accrediting and certifying bodies, payer policies, facility and employer policies, and medical staff bylaws or rules and regulations are just the beginning. The rules vary by practice setting, such as inpatient or outpatient hospital setting, ambulatory surgical center, critical access hospital, federally qualified health center, rural health facility, skilled nursing facility, nursing facility, inpatient rehabilitation facility or the patient's home. PAs who are federally employed have another set of rules entirely.

Many regulations or laws were written long before the PA profession was established. As a result, some policies across the healthcare landscape simply do not include PAs in the language. By virtue of not mentioning PAs, some policies serve to exclude them, despite the belief that the physician's delegatory authority—as conferred by state law—should override any omissions in regulations and authorize a PA to perform any delegated tasks.

In this era of shortages in the health care work force and decreased access to care, it is important to break down barriers and allow PAs to practice to their maximum potential, within the confines of the rules. This means that the myths and urban legends surrounding PA regulations must be eradicated. Of course PAs can see new patients in most situations. Yes, there are situations where PA charts require co-signature. The key is finding the appropriate regulations and knowing when they apply.

It all starts at the practice level, when a PA is prohibited from signing a form, providing a certain service or seeing a certain type of patient. Well, who says? What regulation or law or policy makes that decree? Dispelling the myths and misinformation is an important step in eradicating the barriers to providing care.

Consider the information below a myth-buster toolkit:

- Do not accept any assertion as fact. Ask for the regulatory reference, or at the very least, find
  out if it comes from state law or payer policy or the Joint Commission or from something
  someone heard from a friend.
- Contact the AAPA advocacy and outreach team immediately, once you have identified the issue. The staff will research the problem and can provide the appropriate regulatory reference; it is not enough to say, "AAPA says so."
- Do not pass up an opportunity to educate someone about PA practice. Good information is a
  powerful tool and a good way to foster a dialogue.
- Consultants can sometimes provide incomplete or inaccurate information. Be sure to insist on seeing the regulation to support any claim that a PA cannot do something. Double-check with AAPA.
- Most of the common issues are posted on the AAPA website under the Advocacy and Practice Resources tab, www.aapa.org/advocacy-and-practice-resources, and links are provided to bring you to the actual regulatory reference, should you wish to do a little research yourself.

Check out your hospital bylaws, rules and regulations and policies for unnecessary restrictions. There may be an opportunity to improve utilization of PAs simply by changing some policies.



Tricia Marriott, PA-C, MPAS

<---This article was published in the September 2010 Issue of "PA Professional"

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Want to do more to support your profession?

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Maureen Sullivan Dinnan, J.D.

- If you are concerned about yourself, a family member or a colleague, referrals or inquiries may be made to HAVEN by calling (860) 276-9196. It is not uncommon for a professional to call multiple times before feeling comfortable enough to give their name and to schedule an appointment.
- If you are interested in learning more about HAVEN or in volunteering as a physician assistant professional director or a medical review committee member, please call HAVEN at 860 276-9196.
- If you are concerned about yourself, a colleague, or other medical or health care professional, please do not be afraid to call. Do not allow fear, shame, guilt, or prejudice to prevent you from making educated informed decisions about choices and options available for healthcare professionals facing the challenges of physical or mental illness, emotional/behavioral disorder, or chemical dependence.

# HAVEN: AN OVERVIEW FOR PROFESSIONAL HEALTH AND WELLNESS

By Maureen Sullivan Dinnan, J.D., HAVEN Executive Director

Physician Assistants, like physicians and other medical professionals, take great pride in taking care of others. Unfortunately, physician assistants may do so at the expense of their own health and wellness.

How often have you told yourself when tired or stressed, that you need to work through it. Perhaps, you have thought if I go to a physician, he or she will just give me something to sleep or something to stay focused and so, you prescribe for yourself or you ask a friend to prescribe for you.<sup>1</sup>

Perhaps, you think it is only alcohol. I am only drinking at night. I don't drink to pass out or I drink to pass out, but it is only because I have such a hard time sleeping or I don't do it often... I work hard and so, I play hard.

If any of these phrases sound familiar to you, you are not alone. It is generally accepted that ten to fifteen percent of medical professionals will suffer from substance abuse over the course of their career. The reality is substance abuse is a chronic pervasive disease that is insidious and progressive and health care professionals are not immune. If untreated, the illness will interfere with personal and business relationships, jeopardize licensure and may eventually lead to death

Ironically, the very qualities that help professionals succeed as physician assistants may also signal a vulnerability to abuse, depression, and/or dependence. These traits include strongly independent, compulsive, perfectionistic, heightened sense of responsibility, driven to achieve, willingness to push beyond limits, a need to take care of others, a sense that taking care of one's self is a sign of weakness.

Compounding the issues, physician assistants may find other colleagues, employees or family members who may reinforce or enable the professional's denial of his or her illness. Denial and minimization often afflict those persons who surround the professional. He or she is young, is so smart and accomplished; the behaviors must be situational or an aberration. He or she is starting a family, going through a bad divorce, having a problem with spouse/children/elderly parent, had a motor vehicle accident. I don't want to get involved or make matters worse. Do I really have "proof"? What will we do if he or she cannot work? Fear of financial stress or loss drives the hope that this is a phase. We can cover. We will cancel patients and reschedule tomorrow when he or she is feeling better.

The reality is physician assistants who suffer from substance abuse often do not seek professional help until motivated by external forces such as, an arrest for driving under the influence or being confronted by the State Drug Control Division of the State Department of Consumer Protection or federal DEA for drug diversion. Often, such dramatic events cause family, colleagues, or legal counsel to encourage the physician assistant to seek help for his or her health. A potential for surrender of prescribing privileges and licensure discipline becomes a positive force to allow the professional to work through denial, rationalization or minimization and obtain needed support and treatment.

State law imposes on physician assistants, physicians, state or county medical or osteopathic medical societies or any state professional organization of physician assistants and hospitals a legal mandatory obligation to report physician assistants to the Department of Public Health for investigation when there is any information that appears to show that a physician assistant is or may be unable to practice with skill and safety for reasons including physical or mental illness or substance use. A 2009 survey of 1,891 practicing physicians published in the July 2010 Journal of the American Medical Association suggest that colleagues are reluctant to make such mandated reports as doctors are not confident in the system.

### (Continued from page 4)

Recognizing the need to champion a safe pathway for comprehensive wellness, the Connecticut Academy of Physician Assistants collaborated with other healthcare professional membership organizations for the passage of Public Act 07-103, codified in Connecticut General Statute Section 19a-12a. This legislation enabled the professional organizations to create an assistance program, which would serve as a confidential alternative to public discipline, a place where colleagues would be able to turn for intervention, support, referral and monitoring without fear of discipline or loss of license. HAVEN, the Health Assistance interVention Education Network for Connecticut Health Professionals, Inc. was created as an independent nonprofit agency to fulfill this mission. A call to HAVEN as a confidential alternative to discipline satisfies the mandatory requirement to report to the Department of Public Health.

The good news is that unlike the general population, the recovery rates for healthcare professionals have been estimated as high as 90%. Fear and stigma are unwarranted especially when a healthcare professional is engaged in a structured monitoring program. As a monitoring program, HAVEN confirms that the professional is engaging in therapy, submitting random urine drug screens, following on medical evaluations or consultations, attending anonymous support group meetings, and maintaining reasonable behavioral patterns at work.

HAVEN is a comprehensive health and wellness program designed to allow a confidential alternative for personal wellness conditions which are grounds for licensure discipline. A physician assistant license may be disciplined for physical illness, including but not limited to deterioration through the aging process, emotional disorder or mental illness, or abuse or excessive use of drugs, including alcohol, narcotics, or chemicals. HAVEN has assisted professionals within each of these categories. Whether the health issue is poorly controlled diabetes, chronic neurologic disorders, disruptive behavior, anxiety disorders, depression, or substance abuse, HAVEN is here to help.

A physician assistant who refers himself or herself to HAVEN will initially meet with a professional director, who provides peer support. A plan for support and treatment will be agreed upon. The physician assistant may be required to refrain from practice until HAVEN is able to obtain treatment opinions that the professional is fit to practice and a support system is in place. Professionals who are practicing will have a contact identified in their workplace to increase the likelihood that the physician assistant will be successful as both a provider and a patient.

A multidisciplinary medical review committee reviews redacted, deidentifed records in order to determine the professional's eligibility for or need to participate in HAVEN. If a professional is found to be eligible, the medical review committee sets forth the terms and conditions for participation. Participation in HAVEN signals a commitment to health and wellness. A professional who is in HAVEN demonstrates on a regular basis the strength, discipline, and dedication necessary to challenge, accept and cope with our human conditions. HAVEN is a wellness program and is not an impaired professional program.

This means that if a professional does not comply with the terms and conditions for participating in HAVEN or for maintaining wellness, e.g., random urine drug screens are positive for substances of abuse, HAVEN is required by law to notify the Department of Public Health. The Department has appointed a liaison to HAVEN who has acted fairly and compassionately in the interests of patient safety and professional health when reviewing issues of noncompliance. HAVEN accompanies physician assistants to meetings with this Department liaison who determines ongoing eligibility for confidential rehabilitation on a case-by-case basis. Fortunately, more than eighty-five percent of professionals referred to HAVEN maintain strict compliance with the terms of participation, and such a review is not required.

For more information, see www.haven-ct.org.



# HAVEN

#### **Footnotes:**

In fact, such conduct may violate our state criminal laws amounting to an illegal possession of narcotics or sale/distribution of controlled substances. Unfortunately, too many professionals, including physician assistants, attempt to rationalize their conduct: Unwittingly, we enable a professional to avoid or delay the treatment that is required.

<sup>2</sup> Conn. Gen. Stat. Sec. 20-12e.

- <sup>3</sup> In Connecticut, mandated reporting laws apply only to physicians and physician assistants. See, Conn. Gen. Stat. Sec. 20-12e and Conn. Gen. Stat. Sec. 20-13d.
- <sup>4</sup> See, Pomm and Harmon, "Evaluation and Posttreatment Monitoring of the Impaired Physician," <u>Psychiatric Annals</u>, 34 No. 10 (October 2004)
- <sup>5</sup> DuPont, et.al. "How are addicted physicians treated? A national survey of physician health programs," <u>Journal of Substance</u>
  <u>Abuse Treatment</u>, 37 (2009) 1-7,
  See also, McClellan, et.al., "Five year outcomes in a cohoer study of physicians reated for substance used disorders in the Untied States, <u>British Medical Journal</u> (4 November 2008)
- <sup>6</sup>Conn. Gen. Stat. Sec. 20-12f. Patient harm is not an essential element for discipline. Physical illness and mental illness raise the potential for patient harm and so, are independent grounds for discipline.

Interested in building relationships or working with legislators to influence public policy?

Do you already have interaction with a state lawmaker?

Consider joining one of the following Government Affairs Committee Task Forces:

### **Key Contact System:**

"Key Contacts" are identified as PAs who live in legislative districts of Public Health committee members who are willing to establish a professional working relationship the specific state representative. The goal of which is to increase the magnitude and frequency of PA to Public Health committee member communication.

Testimony Rapid
Response Team (RRT):
The goal of the RRT is to develop an efficient and productive response process to react to calls

for testimony.

# LEGISLATIVE UPDATE

By: Linda Kowalski of the Kowalski Group, LLC

Republicans won decisively in the November elections nationally, but it was a different story here in Connecticut. Democrats won the Governor's office for the first time since 1986, swept all under ticket positions such as Attorney General, reelected all five Democratic Members of the U.S. House and retained strong majorities in the state legislature. In the nationally watched race for U.S. Senate, Democratic Attorney General Richard Blumenthal won easily over Republican Linda McMahon.

ConnAPA would like to congratulate Governor-elect Dan Malloy. We would also like to congratulate all of the winners in the November 2 election, and look forward to working in Hartford with the state's 151 House members and 36 Senators.

At the federal level, ConnAPA will continue the positive working relationship that has existed with Reps. John Larson, Joe Courtney, Rosa DeLauro, Jim Himes and Chris Murphy. We especially look forward to working with U.S. Sen. Blumenthal.

There are many issues that are likely to relate to healthcare in the 2011 session in Hartford. ConnAPA encourages all members to reach out to your local State Rep. and State Sen. You can find them easily by going to www.ct.gov. Click "legislative" then "House" or "Senate". Simply type in your address, click submit and the individuals who represent you will be detailed. Their contact information, email and telephone, is listed.

### AND THEN THERE WERE THREE

By: Don Solimini, PA-C

On September 20th, 2010 University of Bridgeport Physician Assistant Institute(UBPAI) received provisional accreditation from ARC-PA to open the program in January 2011, now the third PA program in the state of Connecticut

Drawing from almost 150 applicants, simply by word of mouth, the inaugural class of 20 students comes from a diverse background of clinical and life experiences.



The successful accreditation culminated a three and a half year process of assessing the viability, ascertaining community interest, hiring faculty and putting together all the requirements necessary to establish a new program. UB PAI had its site visit in May where all necessary documents were submitted and the physical structure was reviewed. UB has heavily invested in a total renovation of a health sciences floor to accommodate classrooms, lecture and lab space, offices, and student facilities.

They have also invested in acquiring faculty with years of didactic and clinical expertise. Dr. Daniel Cervonka, DHSc., CAS, PA-C is a Physician Associate and graduate of Yale University School of Medicine. Dan initially worked in in Emergency Medicine at Yale and later assumed the position of Associate Director of the Physician Assistant Department at Cornell University Medical College. In concert with the teaching faculty he guided the curriculum process to achieved reaccreditation for Cornell. Dan returned to clinical practice accepting the position of Chief Physician Associate at Griffin and later once again to Yale to the practice of Internal Medicine. Throughout his career, he has taught Master's and Doctoral level clinical courses, and has strong interest in Global Health. Dr. Cervonka brings to this position over twenty years of a career devoted to teaching, clinical service and administration.

Professor Martha Petersen, PA-C, MPH, Academic Coordinator, began her medical career as a (Continued on page 7)

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lay midwife in southwestern Colorado, doing home deliveries for migrant workers and 'hippies' with the backup of doctors from the National Health Service Corps. After graduation from the Physician Assistant Department of Trevecca Nazarene University, Martha settled in eastern Pennsylvania and worked clinically for twenty years in Obstetrics and Gynecology, General Surgery and Radiation Oncology. Professor Petersen has spent an extensive amount of time in clinical practice, teaching and curriculum development; holding faculty positions most recently at Duquesne University and University of Pittsburgh.

Professor Mark Taafel, PA-C, MPAS, Clinical Coordinator, has more than 30 years of clinical experience in Primary Care, Psychiatry/ Addiction Medicine and Emergency Medicine. Mark graduated from the Physician Assistant Department of Emory University School of Medicine. While at Emory, he developed his interest in Internal Medicine / Primary Care while working with the indigent population of

Atlanta. Recently, Mark held the position of Chief Physician Associate at Griffin Hospital with Clinical teaching appointments for Quinnipiac University, University of New England and Yale University School of Medicine Physician Associate program. Professor Taafel has a strong connection with the healthcare community in the region and positions the Institute to offer outstanding clinical experiences.

Professor Don Solimini, PA-C, MHA, Assistant Director of Clinical Education comes to the University with over 30 years' experience as a PA, most recently at The Hospital of Central Connecticut in the Department of Pediatrics. A graduate of St. Louis University PA program, he obtained his masters in health administration from Quinnipiac University. Don has been a lecturer

at Quinnipiac University PA Program and Arcadia University PA Program while holding a faculty appointment to George Washington University PA Program. He has been extensively involved in ConnAPA and AAPA, presently a member of the Conference Education Planning Committee of AAPA. Professor Solimini also has traveled globally with various organizations on health care missions.

Dr. Monica Lockwood, MD serves as the Medical Director of the Institute and is a board certified internist devoted to underserved populations. Dr. Lockwood practiced in a busy primary care office affiliated with St. Vincent's Medical Center and during this period she received an award for outstanding teaching from the medical residents. Dr. Lockwood chose to become a volunteer physician and Medical Director for AmeriCares and she also serves as an attending with St. Vincent's Medical Center. Dr. Lockwood will be onsite teaching and working with both the Academic Director and Clinical Director and will advocate for the Physician Assistant Institute in the community.

Tanial Lowe, BS is the Administrative Coordinator for the program, transferring from the Human Resources Department at the University. She has degrees in Accounting & Finance, 4 years in the Air Force, and 18 years in the Air National Guard, as well as experience in insurance

and real estate. Her experience keeps the faculty in line, and the program running efficiently.

The University of Bridgeport Physician Assistant Institute looks forward to participating in growth and development of the profession and contributing to better health in Connecticut.



"UB has heavily invested in a total renovation of a health sciences floor to accommodate classrooms, lecture and lab space, offices, and student facilities."



### YALE PA UPDATE

### By: Susan Curilla PA-S, Fauve Hill PA-S, and Tia Ferrarotti PA-S



Panelists of "Building an Effective Physician-PA Relationship in Clinical Practice" included Patrick Killeen, M.S., PA-C, David Brissette, MMSc., PA-C, and Gerald J. Kerins, M.D.



panel discussion on the topic "Building an Effective Physician-PA Relationship in Clinical Practice." Panelists included Patrick Killeen, M.S., PA-C, President of the American Academy of Physician Assistants, David Brissette, MMSc., PA-C, Assistant Professor of Internal Medicine and Associate Director of the Yale Physician Associate Program, and Gerald J. Kerins, M.D., Section Chief of Geriatrics - St. Raphael's Hospital and Associate Clinical Professor, Yale School of Medicine. The panelists discussed ways to improve communication between physicians and PAs, shared stories from their years of practice, and answered audience questions. All the panelists seemed to agree that both effective communication and mutual respect are the keys to developing a productive physician-PA relationship.

Yale PA students kicked off National PA Week on October 6th, by hosting a

On Friday, October 8, 2010 the classes of 2010, 2011, and 2012 hosted a potluck to thank all of the Yale PA program faculty and staff for their hard work and dedication to our education.

During this time, buttons with the phrases "Love Your Yale PA" and "Yale PA Week 2010" were also handed out to faculty, staff, and students.

On Sunday, 10/10/10, the Yale PA program hosted the final event for PA Week 2010. The Yale PA 5K Race at Lighthouse Point Park in New Haven had a great turn out! 76 runners registered for the race and over \$1200 was raised to benefit the Community Health Care Van. The top three male and female finishers were awarded prizes donated from



local businesses. The top three male finishers were Scott Pusateri (Yale PA Class of 2012), Justin Arnold (Yale PA Class of 2012), and Larry Inge. The top three female finishers were Karlyn Nieland, Carolyn Perotti, and Natalie Grome (Yale PA Class of 2012). We are thankful for and proud of all of our runners, walkers, volunteers and supporters and hope that this Yale PA Week 5K will become a tradition.

The Yale PA 5K
Race at
Lighthouse Point
Park in New
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Community
Health Care Van.



The first-year Yale PA Class of 2012 has gotten off to a great start, as many class members have already begun to get involved within the community. Of the 39 PA students, more than half have become volunteers at the HAVEN Free Clinic in Fair Haven, CT as Junior Clinical Team Members and Interpreters on Saturdays to those in the community without medical insurance. Additionally, the class has held two bake sales (with plans for a third in November) raising over \$800 to be put towards the Hunger and Homelessness Auction held in November. Some athletes in the class have emerged

early, as seven Yale PA students participated in the Stratton Faxon 5K in downtown New Haven in September, and many students ran or volunteered at the PA Week 5K at Lighthouse Point Park. It has only been a few weeks and the Class of 2012 is already showing great promise!





# QUINNIPIAC UNIVERSITY PA PROGRAM UPDATE

By: Robert Pandolfe, PA-S

This Fall has been a busy time as usual for the Quinnipiac PA students. The class of 2012 has been diligently working to fundraise for a medical mission trip to the Dominican Republic. This year 12 students and 2 physicians will work with the nonprofit group Health Horizons International in rural villages in the Puerto Plata region. As part of the commitment to their mission, these students are trying to raise 3,000 dollars to support some local health initiatives in the Dominican Republic. HHI is only able to organize missions such as these a few times a year. All of the money raised will go to HHI to care for patients with chronic diseases like diabetes and hypertension. So far QU's students have raised money through local bake sales on campus and sales of a black wrist band embossed with the slogan "Support Global Health." There are plans for pasta dinners and fundraising nights at local Friendly's and Aunt Chiladas. Class of 2012 trip participant Mindy Busby reflected on her feelings about the trip by saying, "This experience is going to enrich our global perspective of what it means to be a health care provider."

This year the Quinnipiac students are continuing their commitment to screening people in the community for kidney disease through KEEP (Kidney Early Evaluation Program). At each KEEP event the students test blood pressure, blood glucose, height, and weight of people that are at risk for kidney disease. On October 16 and 17 the students helped out by screening over 300 people for risk of developing kidney disease at the NBC health expo.

Midnight Run is still underway every first Monday of the month. Students take time to make meals for up to 75 men at the Men's Shelter on Grand Avenue in New Haven. Also, they bring along hygiene products and clothing that has been donated to the program. This Fall, the community has been incredibly generous with clothing and hygiene donations and the students and faculty are so grateful. If anyone would like to donate men's winter clothing only this time of the year, please contact class of 2012 student Andrea Meyer at AndreaMeyer@quinnipiac.edu.

As a prelude to Primary Care Week Professor Lord and the students have attended UCONN Urban Service Track retreats. The premise of these retreats has been to emphasize the impor-

(Continued on page 10)

"Quinnipiac students are continuing their commitment to screening people in the community for kidney disease through KEEP (Kidney Early Evaluation Program). At each KEEP event the students test blood pressure, blood glucose, height, and weight of people that are at risk for kidney disease. On October 16 and 17 the students helped out by screening over 300 people for risk of developing kidney disease at the NBC health



### **ConnAPA Envisioned Future**

The Connecticut Academy of Physician Assistants is the leading voice, resource, and advocate for PAs and the PA profession in Connecticut.

#### **ConnAPA Mission Statement**

The Connecticut Academy of Physician Assistants is committed to the professional development of physician assistants and the physician/PA team; to quality, cost-effective, patient-centered, and accessible health care; and to advocating for the PA profession.

- Promote the delivery of quality health care.
- Act on behalf of physician assistants regarding legislation pertaining to physician assistant practice, licensure, and other matters deemed pertinent to the profession.
- Promote and provide continuing medical education.
- Promote and provide public education regarding the physician assistant profession to other medical professionals and the general public.
- Maintain liaison relationships with other health care organizations.

### (Continued from page 9)

tance of teamwork in medicine, as well as how to more effectively treat underserved populations. At each retreat the students work with medical, dental, pharmacy and nursing students in an attempt to learn about each other's profession and the roles and responsibilities each entails. With this more clear understanding, early on in their careers, it becomes easier to work together and better serve the patient. During Primary Care Week the Quinnipiac PA students will be hosting two health fairs at assisted living facilities in Hamden. Also, some of the students will be accompanying the UCONN health profession students in health fairs in Hartford and Willimantic. Throughout the week the Quinnipiac students will be participating in daily Lunch and Learns with the UCONN medical students. There is much to learn in one week, but Quinnipiac is dedicated to promoting excellent primary care.

A particularly rewarding activity for the first year students has been reading to children in the ACES program every Wednesday and Friday of each month. These children come from troubling pasts and difficult family lives and school may be their only escape. During the children's lunch period the students share in the joy of reading exciting childhood books. The QU program has committed to having students there to read every week for the rest of the school year.

# PA FOCUS - SARAH ZARBOCK, PA-C



The thing that really motivated me to become a PA was...that it seemed such an absolutely perfect fit for what I wanted as a career – helping people, working in the medical field, and (quite honestly) moving forward in my life.

**I am currently working...**as the editor in chief of the Journal of the American Academy of Physician Assistants.

If I wasn't a PA, I would be a...master quilter, able to make beautiful works of art and wallow in gorgeous fabrics.

When I am not at work, I like to...read, lie on the couch, nap, lie on the couch, read, and nap.

What I would tell someone who wanted to become a PA is...talk to other PAs, both old and young, in

primary care and academe, to get a full picture of what being a PA is all about.

The most important thing that I have learned in life is...just when you think you have it all figured out, something changes.

### We would like to learn more about our membership!

Please share your answers to these questions with a photo of yourself so we can feature you in the next edition! Email your answers and photo to: **ConnAPA@ssmgt.com** 



Join ConnAPA's new Facebook Page!

# Rx SAVINGS CARD: SAVE UP TO 50% ON ALL PRESCRIPTIONS

By: Justin Champagne, PA-C, President



Attention physician assistants! Here's your chance to provide your patients with a huge savings on their prescriptions.

ConnAPA's friend, the Connecticut State Medical Society (CSMS) has teamed up with Avia Partners to provide a pharmacy discount program to Connecticut patients who have no prescription coverage, saving them up to 50% on all of their prescription needs. This Prescription Savings Card (PSC) is a great, simple way to protect you and your family from rising prescription costs. All you need to do is make a simple phone call and the PSC is absolutely free! There are no strings attached and no hidden purchases you have to make in order to obtain the discount. Just present your PSC at any of the participating

pharmacies when filling or refilling your prescriptions. You can get discounts on family pet medications too!

Avia Partners has one of the largest pharmacy discount networks in the country. They've partnered with over 65,000 participating pharmacies to provide convenient access to high quality yet affordable pharmaceutical care to our members across the US. Their goal is always to provide you with the lowest prescription costs and excellent customer service. If you have any questions, you may call Avia Partners Member Services Help Desk toll free at (800) 273-9166.

To request a supply of 50 or 100 Prescription Savings Cards for your patients (who have no prescription coverage) please contact Rhonda Hawes at CSMS, 203-865-0587 ext. 122 or by email to <a href="mailto:rhawes@csms.org">rhawes@csms.org</a>. Tell her that you are a ConnAPA member.

### JOIN CSMS

By: Michael Thompson, Executive Director

As your Executive Director, I urge you to strongly consider membership in the Connecticut State Medical Society. The fact that we are able to join our state medical society as members and participate actively in their organization is a great opportunity for us to show our support for all physicians throughout the state and help facilitate the physician/PA team model of health care.

It has been three years since the CSMS House of Delegates voted to approve Physician Assistants as Associate members of their organization but still only a small percentage of ConnAPA members have realized the potential that this opportunity can provide.



PAs and physicians have been working together clinically for decades, and share a common view of successful healthcare practice and delivery. There is trust and respect between both types of providers and CSMS recognizes that PAs are an integral part of the health care team delivery approach. We need to show the nearly 7,000 physicians represented by CSMS that we are their partners, and offer an increased value to their practice both on an individual level, and on an organizational level.

Finally, there are numerous direct member benefits that you will realize by becoming a mem-



ber, including access to news and publications, meeting notices, discounts on various products and services, and an expanded voice in medicine.

For questions or to join, call the CSMS Membership Department at (203) 865-0587 or visit csms.org.

# WELCOME NEW MEMBERS

Ashley Allatin, PA-C Cecile Berry, PA-C Adiel Coca, PA-C Suzzunne DeCruz, PA-C Eliza Dickmann, PA-C Jenine Gesino, PA-C Jesse Howes, PA-C Gregory Jenkins, PA-C, ATC Kelsey Johnson, PA-C Michael LaLonde, PA-C Erik Libby, PA-C Peter Lopez, PA-C Yali Lu, PA-C John Mackey, PA-C Leslie Muska, PA-C Julie Pappalardo, PA-C Monika Piascik, PA-C Terri Rasmussen, PA-C William Shea, PA-C Diane St. Pierre, PA-C Jennifer Stern, PA-C Kate Sylvester, PA-C, MMSc Allison Valley, PA-C, MHS Henry Vladyka, PA-C Stacey Voegeli, PA-C, MMS Jenny Willets, PA-C, MMS

Sarah Zarbock, PA-C

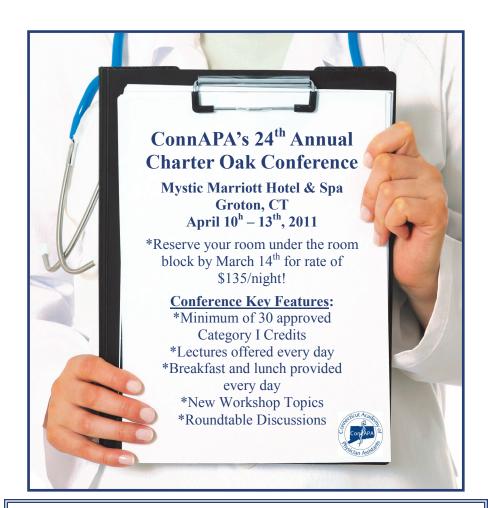




# Connecticut Academy of Physician Assistants

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# Ride for Education



June 25-26, 2011

The Connecticut PA Foundation invites you to a Two-Day Bike Ride from New Haven to West Suffield to help raise money for it's Annual Scholarships. Participants can ride their bike, walk, or even rollerblade!

For more information, please contact Rick Pope at <a href="mailto:pop5rjhjc@aol.com">pop5rjhjc@aol.com</a>

### DONATE TO PAF

 $\underline{http://ssman3.ssmgt.com/ssm/CAPA/members} \ \ \underline{online/members/donations.asp}$