Dr. Breeden to be inaugurated today

James T. Breeden, MD, of Carson City, NV, will be sworn in as ACOG’s 63rd president today during the Presidential Inauguration and Convocation. The event will take place at 9 am in Ballroom 20. Dr. Breeden is president of the Carson Medical Group, a 26-physician multi-specialty group in Carson City, where he has practiced ob-gyn for 35 years and for the past eight years has specialized in women’s office care and gynecologic surgery. Dr. Breeden has served a variety of positions at the Carson Tahoe Hospital, where he was chief of staff, a 10-year member of the executive board, and chair of the department of ob-gyn. He is also a founding partner, officer, and director of Sierra Surgery Hospital. Dr. Breeden received his medical degree from the Marquette School of Medicine in Milwaukee, WI. He completed his residency training at Mercy Hospital and Medical Center in San Diego and went on to serve as a lieutenant commander in the US Navy. In addition to his medical degree, Dr. Breeden is a certified financial planner and has a master’s of science degree in financial planning. He has served as vice president and treasurer for ACOG and has spoken across the country and at countless ob-gyn meetings on financial planning for physicians.

Filmmakers address maternal, infant mortality rates

Two women who’ve used their own personal experiences and convictions to educate people about maternal and infant mortality rates through film were part of a special session Tuesday. Christy Turlington Burns, model, documentary filmmaker, and global maternal health advocate, and Tonya Lewis Lee, author, producer, and documentary filmmaker, joined ACOG President James N. Martin, Jr, MD, on stage to discuss how they became interested in the subjects and what they’ve done to make a difference. Ms. Turlington Burns, currently in a master’s degree program in public health at Columbia University, founded the organization Every Mother Counts and filmed the 2010 documentary “No Woman, No Cry,” after learning that hundreds of thousands of women die each year during childbirth—and that 90% of these deaths are preventable.

“It’s really a privilege to be among people who have the skills, the desire, and the passion to be able to prevent these needless deaths,” she said. “You are a particular skill set and community that I think has the power to do so much more than so many other groups of us.”

Professors refuse to be stumped by Junior Fellows

The panelists at Stump the Professors are almost like feared gunslingers, with Junior Fellows as the young guns looking to take them down outside the saloon in the Old West. Tuesday, professors Ralph W. Hale, MD, and Norman F. Gant Jr, MD, weren’t waiting around to take a bullet. The two esteemed physicians took the offensive at the start of The Gerald and Barbara Holzman Stump the Professors Session, cracking wise and asking questions before they could be challenged during the fun-filled session. They were joined by Nanette F. Santoro, MD, and Cynthia I. Macri, MD. As the first Junior Fellow, Melissa Brooks, MD, Dalhousie University, Halifax, Nova Scotia, Canada, began presenting her case, the professors peppered her with questions until Dr. Hale said, “We are going to so confuse the presenters they are going to tell us the answer.”

Dr. Brooks, though, did not flinch, standing her ground. The professors continued their questioning ways, but session moderator Raul Artal, MD, ACM general chair, doing his best Marshal Matt Dillon impression, stuck to his guns. Still, Dr. Artal seemed to be winking the entire session moderator Raul Artal, MD, ACM general chair, doing his best Marshal Matt Dillon impression, stuck to his guns. Still, Dr. Artal seemed to be winking the entire

ACOG President James N. Martin, Jr., MD, asks maternal and infant health advocates and filmmakers Tonya Lewis Lee (middle) and Christy Turlington Burns questions submitted Tuesday by audience members during a special session.

See Stump, page 3
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March of Dimes Lecture looks at 7 habits of the successful ob-gyn

O
b-gyns face many hurdles in their practices, but Monday’s March of Dimes lecturer laid out a plan to help them clear many of those obstacles.

Taking a cue from the popular book by Stephen R. Covey, Steven L. Clark, MD, presented “Seven Habits of the Highly Successful Obstetrician.” Dr. Clark is medical director of the Women and Newborn service line for the Hospital Corporation of America (HCA) in Twin Bridges, MT.

HCA is the largest private provider of hospital services in the US, with 110 hospitals that delivered 250,000 babies last year, providing Dr. Clark a wealth of data to support his views.

“I have to analyze practices, and I want to share lessons I’ve learned in more than 2 million deliveries during the last eight years,” he said. Leading the list was “Read and Study College Publications.” Dr. Clark recommends that all ob-gyns reserve 30 to 60 minutes each month to read College Practice Bulletins and Committee Opinions published monthly in the Green Journal.

Doing so can help ob-gyns ensure that they comply with ACOG practice recommendations, such as not performing elective deliveries prior to 39 weeks. These elective deliveries cost the US health care system $1 billion annually for NICU care, Dr. Clark said. No. 2 on the list is “Standardize Institutional Practice for High-Risk Situations.”

Standardization is tied to teamwork and following a plan, which is discussed for the nation as a whole, but is often ignored within institutions, he said. “The successful obstetrician will make sure best processes are handled by their team the same way every time,” Dr. Clark said.

No. 3 is “Integrate the ‘10 Clinical Diamonds’ for Preventing Maternal Death in Your Practice.” He reviewed the 10 recommendations, such as automatically ordering a CT angiogram for women complaining of chest pains or providing oxygen and a chest X-ray when pulmonary edema presents.

Other “diamonds” include prescribing medication for high blood pressure during pregnancy, calling a fetal specialist when maternal cardiac disease is suspected, and quickly dealing with massive postpartum blood loss.

No. 4 is “Remember Your Goal—Healthy Mother/Healthy Baby.” “I’m a firm believer that every woman deserves either an easy vaginal birth or an easy cesarean birth,” Dr. Clark said, adding that physicians should avoid difficult vaginal births whenever possible.

No. 5 is “Treat Nurses With Respect.” “Obstetrics is a team sport, not an individual sport,” he said. “Do you listen to nurses’ concerns? If nurses fear to call you, you need to change.”

No. 6 is “Deal Responsibly With Sleep Deprivation.” After 24 hours of sleep deprivation, a person is “functionally intoxicated” and needs to sleep eight hours a night for three consecutive nights to recover, Dr. Clark said.

No. 7 is not a habit, but a recognition of the importance of following the first six habits to provide safe care to mothers and their babies.

“The unspeakable tragedy of the death of a mother and a baby has been transformed by your skill into the unspeakable beauty of life, love, and happiness,” Dr. Clark said in discussing the performance of a late-night emergency cesarean delivery. “The highly successful obstetrician continually reminds himself or herself of this feeling. As obstetricians and gynecologists, we have the highest calling.”

Help provide diapers to babies in need

D
id you know that one in three women in the US struggles to afford clean diapers for her baby? In low-income families, infants may spend an entire day in one diaper. ACOG Junior Fellows are committed to helping provide diapers for these families, and you can help during this year’s ACM.

Junior Fellows, working with www.helpamotherout.org, are spearheading the ACOG Mother’s Day Diaper Drive, which is raising money to buy diapers for California babies. Scan the QR code below with your smartphone during the ACM to donate money to buy diapers. Or, visit www.razoo.com and type “ACOG” in the search field to donate. Just $20 helps buy a week’s worth of diapers, while $100 can help four families. In the past year, ACOG Junior Fellows have collected more than 50,000 diapers to donate to low-income families.

Steven L. Clark, MD, said, “If we cannot police ourselves according to excellent advice contained in College documents, others will do it for us.”
Free resources available at ACOG Booth

Schedule time to stop by the College’s Booth, #1010, in the Exhibit Hall to gather free copies of resources, browse College publications, and talk with staff. The Computer Lab, which features new technology on display, is also a part of the booth. Staff members are available to answer your questions.

VIEW DVDS
Watch “Healing Our Own” at 11 am today at the booth. In the new ACOG DVD, ob-gyns describe the painful effect adverse events have had on them and how they recovered. At 12 pm and 12:30 pm, view “Smoking Cessation for Pregnancy and Beyond: A Virtual Clinic,” which offers case simulations and comprehensive discussions of patient visits; mini-lectures on relevant topics from leading experts; and interactive interviews with real patients who have quit.

ACOG SOUVENIRS
Take home a few ACOG souvenirs from the booth. Attendees can collect pens, packs of sticky notes, luggage tags, hand sanitizer, lunch bags, and water bottles.

PROFESSIONAL LIABILITY SURVEY AND RESOURCES
Preliminary results from the 2012 ACOG Survey on Professional Liability are available for review at the booth. Reports include national and district-specific information. Final reports will be available online by mid-summer.


You also can pick up free medical liability brochures on various topics and risk management pocket reference cards on clinical areas commonly associated with liability claims. The cards, which are distilled from ACOG Practice Bulletins, are intended to help physicians improve patient care and reduce liability risk.

NEW GREEN JOURNAL APP
The Green Journal is now on your iPad! Try out the Green Journal’s new iPad app at the booth. Staff and editors of Obstetrics & Gynecology are on hand to demonstrate the app and answer questions about the journal.

Young physicians hear about benefits of Affordable Care Act

While the fate of the 2010 Patient Protection and Affordable Care Act awaits a decision by the US Supreme Court, ob-gyn Michael Policar, MD, MPH, is betting the court will uphold the entire law and believes it holds many benefits for ob-gyns.

Dr. Policar, clinical professor of ob-gyn and reproductive sciences at the University of California, San Francisco, School of Medicine, spoke at the 8th annual Young Physicians Breakfast Forum Tuesday morning and explained how the act benefits women’s health care in general and ob-gyns in particular.

For one thing, the act ensures health insurance coverage for many more women and greater access to care through health insurance exchanges and a provision that insurance companies cannot discriminate on the basis of gender or deny coverage for pre-existing conditions.

In addition, the law eliminates co-pays and deductibles for select preventive care services in women’s health, such as prenatal care and well-woman visits, he said.

A major benefit for ob-gyns is a provision for direct access to obstetric and gynecologic services without referrals from a primary care physician or preauthorization from an insurance carrier.

“ACOG was out front in both its public advocacy and behind-the-scenes lobbying to make sure women have direct access to ob-gyns,” Dr. Policar said. “In many states, women who want to see an ob-gyn have to have a referral from a primary care provider.”

Hospitalists provide benefits for patients, ob-gyns, hospitals

When ob-gyn hospitalists were introduced in 1996, they were seen in fewer than 5% of hospitals and they numbered about 500. By 2010, 80% of medical institutions had hospitalists, and their number grew to 30,800. Tuesday, a hospitalist leader shared his insights into the specialized workforce.

“Sooner or later, hospitalists are going to be the standard of care,” said Rob Olson, MD, an obstetrician hospitalist and president of the Society of OB/GYN Hospitalists. Dr. Olson, who also is the editor of ObGynHospitalist.com, presented “Thinking of Being a Hospitalist? What You Need to Know.”

Ob-gyn hospitalists are present in the institution to respond to ob-gyn emergencies, he said. They also triage unassigned patients or patients a private practitioner asked them to see. They are responsible for the labor and delivery of patients unassigned or signed out, and they assist with cesarean deliveries. Hospitalists also consult with family practitioners and midwives and may serve as a perinatologist extender.

The benefit to hospitals is that a hospitalist improves patient safety; satisfaction for patients, physicians and nurses; and financial returns, Dr. Olson said. “A true hospitalist is more involved than just being on call.”

More institutions are adding hospitalists despite the setup costs because the return on investment is great. “You have better outcomes and reduce malpractice costs, and it is the right thing to do,” he said.

Other benefits include greater safety of labor and delivery, an improved lifestyle and work environment for private ob-gyns, and relief for the burden of unassigned patients and unwanted consultations, Dr. Olson said.

Hospitals may reap benefits in two ways. First, hospitalists can fill the gap created by the lack of maternal-fetal medicine specialists, and second, they can generate more revenue for the institution.

The average salary for a hospitalist is $200,000 to $225,000 a year, and hospitalists have a set schedule, he said, adding that he sold his private practice to become a hospitalist. “The ideal person is a team player,” Dr. Olson said. “It is not a job for a rookie. It is a job for a seasoned obstetrician.”

There are challenges, such as follow-up care for unassigned patients, backing up on-call physicians, dealing with a variety of patients, and fatigue on long shifts.

“Still, I am convinced that hospitalists make it safer for women in the hospital,” Dr. Olson said.

Lapel pin available for newest Fellows

The College is providing lapel pins for incoming Fellows so they can be recognized and congratulated by ACM attendees. The blue and gold lapel pins will recognize the newest Fellows from the classes of 2011 and January 2012, and individuals who became Fellows in 2010 and want to participate in this year’s ceremony.

The pins have been given to those individuals who will be inducted into the College on Wednesday at the Presidential Inauguration and Convocation. If you see someone wearing the lapel pin, please welcome him or her into the College. If you are a member of the classes of January 2012 or 2011 or 2010 and did not receive a pin at registration, please visit the Membership Desk in the Registration Area to pick one up.
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FILMMAKERS continued from page 1

Following the delivery of her daughter, Grace, Ms. Turlington Burns experienced complications that led to severe bleeding.

"In trying to understand why I had that complication, I came across some of the global figures," she said. "At the time, half a million women were dying every year from pregnancy-related causes. The US was ranked 41st at that time. The more I learned, the more I felt that I had to get involved."

Ms. Lewis Lee learned about US infant mortality rates after representatives of the US Department of Health and Human Services’ Office of Minority Health approached her about the issue. The US is ranked 40th in the world in infant mortality.

"I was not seeing what’s happening in terms of infant mortality in the news," she said. "I figured if I was unaware of what was going on, then a lot of other people were not aware. I just had to get on board and start increasing awareness."

Ms. Lewis Lee is now a spokeswoman for “A Healthy Baby Begins with You,” a national infant mortality campaign sponsored by the Office of Minority Health. She also filmed the documentary “Crisis in the Crib: Saving Our Nation’s Babies,” which focuses on the high infant mortality rate in the African American community in the US. Every year, 8,000 African American infants die during their first year of life.

“It matters to me because I know America is only as good as its people— all of its people," she said to applause. "Whether we know it or not, every single one of those children we lose, we’re losing something. They matter. It’s important to me that we let people know they matter, they have a purpose, and we help them find that purpose."

The two women acknowledged that ACOG is an important partner in the push to reduce maternal and infant mortality rates. “America needs all of her children, and each one of us has the ability to make a difference,” Ms. Lewis Lee said.

“I think we have to recognize that none of us can do this alone. It’s a community effort. We need all hands on deck."

At the start of the session, Herbert B. Peterson, MD, chair of the ACOG Global Operations Advisory Group, announced that The College has created a new Office of Global Women’s Health. The office reports to the new vice president for health policy, Barbara S. Levy, MD.

Dr. Peterson also said The College is partnering with several organizations on a new global public/private initiative on maternal mortality. “Together, we will work to dramatically decrease maternal deaths globally with an initial focus in Zambia and Uganda and more to come,” he said to applause. “Ladies and gentlemen, this is unprecedented. We are in a precious moment, and we ask each of you to join us in this vision and do whatever part you can. This Mother’s Day, we have new hope. As we move forward together, you are part of that hope.”

Preeclampsia Twitter chat

Maternal-fetal medicine specialists Douglas Woelkers, MD, from the University of California, San Diego, and Michelle Owens, MD, from the University of Mississippi Medical Center (red dress), lead a Twitter chat on preeclampsia live from the ACM Tuesday. They were joined by Eleni Z. Tsigas, executive director of the Preeclampsia Foundation. ACOG’s Office of Communications conducts regular Twitter chats on women’s health issues using the hashtag #ACOGchat. Follow ACOG at www.twitter.com/acognews.

Enter the Junior Fellow essay contest

The Junior Fellow Congress Advisory Council is encouraging Junior Fellows to enter the 2012 Essay Contest, with the theme “Advocacy and the Importance of Supporting Patients Beyond the Exam Room.”

One winning essay will be selected. The winner will receive a $100 gift certificate to the ACOG Bookstore, and the essay will be published in an upcoming issue of the Green Journal.

All active Junior Fellows can submit an essay between 500 and 750 words. Submit your Word or pdf file by June 1 to chimes@acog.org. For more information, visit www.acog.org/About_ACOG/ACOG_Departments/Junior_Fellows and click on “National Contests and Awards.”

Question of the Day

What have you learned at the ACM that will be helpful in your daily practice?

“I think some information from the preeclampsia talk yesterday provided some valuable new evidence on how to manage severe preeclampsias and even mild preeclampsias that will change the way we practice.”

Sangita Kaur, MD Royal Oak, MI

“I went to a talk on vulvar diseases, and the speakers have an entire website that has lectures on vulvar disease. The topic was great, it was an interactive session, and now I know that I can go online for the refreshers.”

Anna Darmish, MD Salt Lake City

“My favorite topic was on the habits of successful ob-gyns. That was the best session of all. It should be mandatory for all of us. It was a good message for all levels.”

Niseth Unnurani, MD Coral Springs, Fl.

ACM HIGHLIGHTS ON YOUR HOTEL TV

Tune in to the ACOG Broadcast News in the comfort of your hotel room for ACM updates, daily interviews with ACOG leaders, and things to see and do while you are in San Diego.

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Hard Rock Hotel 59
Hilton San Diego Bayfront 49
Hilton Gaslamp 46
Hotel Solamar 44
Manchester Grand Hyatt 42
Omni San Diego 16
Marriott Marquis and Marina 85
W San Diego 68
Westin Gaslamp Quarter 20
Westin 44
Expert presents STD, vaginitis management updates Tuesday during Clinical Seminar

A Clinical Seminar Tuesday presented by Kevin A. Ault, MD, associate professor of ob-gyn at Emory University School of Medicine in Atlanta, provided an update on the diagnosis and treatment of sexually transmitted diseases and vaginitis, including discussions of HIV infection, chlamydia, and gonorrhea.

Current recommendations for HIV screening call for routine screening of all Americans ages 13 to 64, to be repeated annually if the individual is at increased risk of HIV infection, unless the patient explicitly opts out of taking the test, Dr. Ault said. HIV testing should be part of routine care.

Chlamydia can cause several diseases, such as urethritis, cervicitis, and pelvic inflammatory disease. Seventy percent of women with chlamydia are asymptomatic. “It’s referred to as a silent epidemic because it’s a disease women get in their teens and early 20s and then need IVF to become pregnant in their 30s,” he said.

The prevalence of chlamydia varies from state to state, but the lowest rates occur in states that screen young women for this infection, Dr. Ault said. The College recommends annual screening for chlamydia of all sexually active women age 25 and younger.

The treatment for uncomplicated vulvovaginal candidiasis is topical azoles in one, three, and seven daily doses and oral fluconazole. The cure rate is about 90%. Ten to 14 days of therapy are recommended for complicated cases.

Trichomonas vaginitis is the most curable STD in the world, Dr. Ault said. Therapy consists of metronidazole or tinidazole 2 g PO in a single dose.

Pregnancy is filled with questions. One guide has all the answers.

Stop by Booth 2239
Pick up your complimentary, signed copy of the new edition of Your Pregnancy Week by Week while they last.

Historical film screening looks at forceps use

Travel back to 1934 with the ACM’s Third Annual Historical Film Series to learn about the history and techniques of forceps deliveries. This afternoon, ACOG staff will screen “The Forceps Operation,” produced by Joseph B. DeLee, MD, founder of the Chicago Lying-in Hospital in 1895, at the ACOG Booth in the ACM Exhibit Hall.

“The Forceps Operation” was used as an instructional film in the 1930s, illustrating the principles and use of obstetric forceps. Dr. DeLee begins the film with a history of forceps and the physicians who designed them and then describes and demonstrates the deliveries for which those forceps are used.

The film expresses the techniques and philosophies popular at the time, which have evolved significantly over the past 80 years. It will be shown from 1 to 2 pm today, directly after the inaugural Hale Lecture, “The Obstetrical Forceps: Evolution to Extinction,” which will be given by the lecture’s namesake and former ACOG executive vice president, Ralph W. Hale, MD.

Also available:

YourPregnancyBook.com
Mathers Lecture to address ob-gyn/breast relationship

The importance of partnership will be discussed during the John and Marney Mathers Lecture, “Breast Cancer Detection and Risk Reduction: What Physicians and Patients Need to Know,” from 12 to 1 pm today in Ballroom 20. Virginia M. Herrmann, MD, professor of surgery in the division of surgical oncology and endocrinology at Medical University of South Carolina in Charleston, will share how modern discoveries allow us to detect breast cancer earlier and provide more sophisticated care. She will provide a historical perspective of the treatment of breast cancer from ancient history to today.

“Identification of patients who are at increased risk is important and allows gynecologists and breast surgeons to work as a team to care for women,” she said. Attendees will be able to identify appropriate uses of screening modalities for breast cancer, including mammography, ultrasound, MRI scanning, and newer tools, such as breast tomosynthesis. Attendees also will be able to identify patients who are at an increased risk for hereditary breast cancer and understand available risk-reduction strategies. “They will appreciate the indications for genetic testing and the need for genetic counseling prior to testing,” she said.

Dr. Herrmann also will address controversial 2009 guidelines released from the US Preventive Services Task Force that stated women didn’t need a mammogram until age 50. The College continues to recommend annual mammograms for women beginning at age 40. “Routine screening mammography saves lives, particularly for women in their 40s and 50s,” she said. “It is important for physicians to understand the rationale and benefit of screening, and the role of additional diagnostic procedures.”

Dr. Herrmann acknowledged that ob-gyns are the first source of care for many women, including for breast health. Therefore, she said, there is significant opportunity for gynecologists and breast surgeons to work together in caring for women.

“I think women look to their ob-gyn physician for advice on how often they should be screened, what their risk is, and what they can do to reduce their risk,” she said. “Women don’t go to a breast surgeon—they’re referred to a breast surgeon for a breast problem or an abnormal mammogram. The ob-gyn is the first line for determining how often a woman is screened.”

Not only can ob-gyns and breast surgeons form a more powerful and effective line of defense against breast cancer, they also can improve patient care together.

“In today’s world,” Dr. Herrmann said, “available technology and practice guidelines for breast patients are changing rapidly, and it’s incumbent upon physicians to understand the guidelines and newer treatment modalities to improve outcomes for our women with both benign and malignant breast problems.”

Intimate partner violence topic of Brown Bag Seminar

Attendees at Tuesday’s Brown Bag Seminar “Making the Connection: Reproductive Health and Partner Violence” were asked a simple, but critical question: “Can you remember a time when a patient presented health symptoms that made you suspect there was a problem at home, but neither you nor the patient said anything?”

The fact is every woman should be asked about violence or reproductive coercion in her relationship. A study presented during the seminar (Miller, et al. 2010) revealed that among a random sample of 1,278 women ages 16–29 in five family planning clinics, 53% experienced domestic/sexual partner violence. The data mirror other findings from reproductive health clinics.

“It’s really an invisible problem to those of us who don’t ask,” said co-presenter Eve Espey, MD, MPH, University of New Mexico School of Medicine in Albuquerque, NM. “I think this is an area where we really need to raise our consciousness.”

Virginia Ann Duplessis, program manager for Futures Without Violence, a national health resource center on domestic violence. The data mirror other findings from reproductive health clinics.

“You get that feeling in your gut or maybe injuries that are inconsistent with their reasons,” she said. “I started out as an advocate about 20 years ago, then I moved into the public health setting. There are so many ‘ah-ha’ moments when I think back to women I worked with and missed opportunities.”

For more information or to donate to Futures Without Violence, visit www.futureswithoutviolence.org.

ACOG’s Tweeting Live at the ACM!

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ACOG Office of Communications

Exhibit Hall updates

Due to a reconciliation of the ACM Exhibit Hall floor plan, some exhibitors were moved to new locations. This list outlines the company name, original booth location, and new booth location.

Company Old# New#

Baxter Healthcare.................323........601

Evofem, Inc........................314........418

Hospital Corporation of America (HCA).........329........504

Kinetic Concepts, Inc.........401........502

Laerdal Medical................316........701

Liposuction.com................330........421

PerkinElmer Labs..............319........603

Take Shape For Life...........433........423

The Pregnancy Power........429........535

Trigg Laboratories, Inc........430........531

It’s really an invisible problem to those of us who don’t ask.

Eve Espey, MD, MPH
Introducing Provella™ – a new probiotic formula specifically designed for women to support digestive, feminine, and immune health.* Samples available at booth #1330.

*These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure, or prevent any disease.
Ten receive Outstanding District Service Awards

The Outstanding District Service Award is given to people who have made notable contributions to their districts. The following individuals will be honored during today’s Presidential Inauguration and Convocation.

**DISTRICT I**
Mark S. Cooper, MD
Dr. Mark S. Cooper has been in practice in Augusta, ME, for more than 25 years. At the Maine General Medical Center, he has served as chair of the ob-gyn department and chief of staff of the hospital. He is currently a medical director for the Maine Board of Licensure in Medicine. Dr. Cooper received his medical degree from the University of Vermont and completed his residency at the University of California, Los Angeles.

As a member of the Maine Medical Association, he served as chair of its Legislative Committee and as a member of the Executive Committee. He served in a number of positions in the Medical Mutual Insurance Company of Maine, a medical liability carrier for physicians in New England, including as a member of the Claims Committee and Underwriting Committee. He also served as treasurer and as a director.

For ACOG, Dr. Cooper is the District I treasurer and has served as the District I secretary. He was the District I general meeting chair twice. He was the treasurer, vice chair, and chair of the Maine Section. Dr. Cooper was vice chair of the ACOG Committee on Genetics and was a member of the Committee on Professional Liability. His input in these various roles has been thoughtful and focused on the issues at hand. He has a clear understanding of not only the mission of ACOG, but also the need to be fiscally sound as an organization.

**DISTRICT II**
Ronald V. Uva, MD
Dr. Ronald V. Uva is chief of ob-gyn at Oswego Hospital in Oswego, NY. He received his medical degree from the University of Bologna, Italy, and completed his residency at Upstate Medical University in Syracuse, NY.

For ACOG, he currently serves as the District II vice chair. He also was the chair of the District II Legislative Committee for several years. As such, he organized two successful Lobby Days that brought hundreds of ob-gyns from across New York to Albany to discuss pertinent political issues with their state and local representatives. His tireless efforts in the area of legislative affairs, as well as physician and patient advocacy, are a vital asset to his colleagues, the specialty, and the women of New York.

Dr. Uva also has represented District II on the national Committee on Nominations. He has provided exceptional service to District II and has demonstrated the utmost professionalism in the field of ob-gyn.

**DISTRICT III**
Owen C. Montgomery, MD
Dr. Owen C. Montgomery is an associate professor and chair of the ob-gyn department at Drexel University College of Medicine and holds a secondary appointment as an associate professor in the School of Nursing and Health Professionals at Drexel University, both in Philadelphia. He previously served as vice chair and director of pelvic floor surgery.

Dr. Montgomery received his medical degree from Hahnemann University in Philadelphia and completed his ob-gyn internship and residency at Jefferson Medical College in Philadelphia.

For ACOG, he served as the Pennsylvan ia Section secretary, vice chair, and chair. While he served as District III chair, he served on the Executive Boards and chaired the Council of District Chairs. He was the advisor to the Junior Fellow Congress Advisory Council.

Dr. Montgomery has served on the national committees on Ambulatory Practice Operations, Patient Education, Adolescent Health Care, Finance, Electronic Medical Records, and Nominations. He has been a member of task forces on Governance, Strategic Planning, and District and Section Activities. He also served on the Making Obstetrics and Maternity Safer Work Group for the 2011 Issue of the Year.

Dr. Montgomery has published several peer-reviewed articles and abstracts, and recently a book chapter. He currently is a reviewer for Postgraduate Medicine, and previously reviewed the Journal of Adolescent Gynecology and the American Journal of Obstetrics and Gynecology. He is an invited lecturer and has presented worldwide. Dr. Montgomery is a member of several professional organizations, including the American Urogynecologic Society, the North American Menopause Society, the North American Society of Pediatric and Adolescent Gynecology, and the Association of Professors of Gynecology and Obstetrics. He also is a past president of the Philadelphia Obstetrical Society.

**DISTRICT IV**
Herbert B. Peterson, MD
Dr. Herbert B. Peterson is the William R. Kenan Jr. Distinguished Professor and chair of the department of maternal and child health at the University of North Carolina (UNC) Gillings School of Global Public Health and professor of the department of ob-gyn at the UNC School of Medicine.

Dr. Peterson is also director of the World Health Organization Collaborating Centre for Research Evidence for Sexual and Reproductive Health, based in the department of maternal and child health at UNC. He received his medical degree from the University of Pittsburgh School of Medicine. He completed residency training in ob-gyn at UNC and training in epidemiology as an epidemic intelligence service officer at the Centers for Disease Control and Prevention (CDC).

For ACOG, he currently serves as chair of the Committee on Global Obstetrics and the Global Operations Advisory Group. He served as vice chair of the Clinical Document Review Panel—Gynecology and the Council on Resident Education in Obstetrics and Gynecology’s Examination Committee. He was a member of the committees on Gynecologic Practice, Practice Patterns, and Practice Bulletins—Gynecology.

Dr. Peterson served for 20 years at the CDC, where he was chief of the Epidemiologic Studies Branch and the first chief of the Women’s Health and Fertility Branch of the Division of Reproductive Health. He also served as a commissioned officer in the US Public Health Service for 20 years and retired in 2002 with the rank of captain after receiving the Surgeon General’s Exemplary Service Medal and the Distinguished Service Medal. In 1999, he was assigned by the CDC to the World Health Organization in Geneva, Switzerland, where he served until going to UNC in 2004.

Dr. Peterson has been elected to membership in the Institute of Medicine of the National Academy of Sciences, the American Gynecological and Obstetrical Society, and the Society for Gynecologic Investigation. He is a Fellow of the American College of Preventive Medicine and the American College of Epidemiology.

**DISTRICT V**
J. Craig Strafford, MPH
Dr. J. Craig Strafford has maintained an active practice in ob-gyn within a large multispecialty group for more than 40 years in Gallipolis, OH. He also served for 15 years as president of the group. He was a health maintenance organization medical director and director of clinical research. He received his medical degree from The Ohio State University and completed his ob-gyn residency at the Indiana University Medical Center.

For ACOG, he currently serves as a member of the Ob-GynPAC Governing Committee. He served on the Executive Boards as vice president and District V chair. He also was District V treasurer and vice chair. Dr. Strafford has served as chair and vice chair of the Grievance Committee and the Committee on Practice Management. He served as a member of the committees on Coding and Nomenclature, Gynecologic Practice, Government Affairs, Nominations, Credentials, Health Care, and Advocacy, underserved Women, and Electronic Medical Records.

He has also represented ACOG as a delegate and alternate delegate to the American Medical Association. Dr. Strafford was general arrangements chair for District V and the Ohio Section secretary-treasurer, vice chair, and chair. He has been a surveyor for the Voluntary Review of Quality of Care Program and a McCain Fellow.

Since obtaining his master’s of public health degree in 2008, Dr. Strafford has participated in various statewide task force projects to extend health care to uninsured individuals. He currently serves as secretary of the state medical board for physician discipline and licensure. Dr. Strafford is a dedicated, thoughtful, and principled physician who has contributed in so many ways to the success of ACOG, District V, and the improvement in health care for women.

**DISTRICT VII**
John W. Calkins, MD
Dr. John W. Calkins has been a member of the ob-gyn department at the University of Kansas Medical Center in Kansas City, KS, since 1980 and rose through the ranks to the department chair in 1997. He has twice served as interim department chair. He became permanent chair of the department in the summer of 2001, which he held until 2006. Dr. Calkins remains active on the teaching faculty and currently is the clerkship director for the third-year medical student rotation in ob-gyn. He received his medical degree from the University of Iowa and completed his ob-gyn residency at the University of Kansas.

For ACOG, Dr. Calkins was the Kansas Section vice chair and chair. He subsequently served as treasurer and chair, and chair of District VII. While chair, he served on the Executive Boards and the Council of District Chairs. During his tenure as district chair, he played an integral role in the development of District XI (formerly the Texas Section) and helped shepherd District VII during its loss of the Texas Section. He also served

see AWARDS, page 13
OFIRMEV® provides significant pain relief*1
- OFIRMEV 1 g (q6h) + patient-controlled analgesia (PCA) morphine demonstrated significant pain relief vs placebo + PCA morphine (P<0.05 over 6 h)1
- OFIRMEV 1 g (q6h) + PCA morphine showed greater reduction in pain intensity over 24 h (SPID24) compared to placebo + PCA morphine (P<0.001)2

OFIRMEV reduces opioid consumption*1
- OFIRMEV 1 g (q6h) + PCA morphine significantly reduced morphine consumption vs placebo + PCA morphine (-46% over 6 h, P<0.01; -33% over 24 h, P<0.01)1
- The clinical benefit of reduced opioid consumption was not demonstrated

Schedule OFIRMEV q6h for the first 24 h
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OFIRMEV is contraindicated in patients with severe hepatic impairment, severe active liver disease or with known hypersensitivity to acetaminophen or to any of the excipients in the formulation. Acetaminophen should be used with caution in patients with the following conditions: hepatic impairment or active hepatic disease, alcoholism, chronic malnutrition, severe hypovolemia, or severe renal impairment.

Do not exceed the maximum recommended daily dose of acetaminophen. Administration of acetaminophen by any route in doses higher than recommended may result in hepatic injury, including the risk of severe hepatotoxicity and death.

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* Randomized, double-blind, placebo-controlled, single- and repeated-dose 24-h study (n=101). Patients received OFIRMEV 1 g + PCA morphine or placebo + PCA morphine the morning following total hip or knee replacement surgery. Primary endpoint: pain relief measured on a 5-point verbal scale over 6 h. Morphine rescue was administered as needed.
† SPID24=sum of pain intensity differences, based on VAS score, from baseline, at 0 to 24 h.


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Brief Summary of the Report on the Clinical Effectiveness of a Treatment

RECOMMENDATIONS AND USAGE

- DIFRAMEV is a safe and effective medication that is indicated for the management of mild to moderate pain in adults and children 12 years of age and older.

- It is important to monitor patients for side effects and discontinuation if necessary.

-家属 should be educated about the medication, including proper dosage and administration.

- Regular follow-up visits are recommended to assess pain management and adjust medication as needed.

- Healthcare providers should be aware of potential drug interactions and adjust treatment accordingly.

- Patients should be advised to report any signs of allergy or adverse reactions.

- The medication should be stored properly to maintain its effectiveness.

- Overall, DIFRAMEV provides effective pain relief and is well-tolerated by patients.
as the District VII program chair. Dr. Calkins currently serves on the national Compensation Committee, the Appeals Panel Committee, and the Committee on Nominations. He has served on the Committee on Nominations for several terms. He also served on the committees on Coding and Nomenclature and Credentials and several presidential task forces.

DISTRICT VIII

Jerry Joshua Kopelman, MD

Dr. Jerry Joshua Kopelman is a solo gynecologic practitioner and a clinical assistant professor of ob-gyn at the University of Colorado School of Medicine. His practice includes the full spectrum of medical and surgical management of gynecologic disorders. He is particularly interested in the medical and endoscopic surgical management of endometriosis.

Dr. Kopelman received his medical degree from the New York University School of Medicine and completed his internship in general medicine and his residency in ob-gyn at New York University–Bellevue Medical Center. For ACOG, Dr. Kopelman served as the Colorado Section vice chair and chair. After serving on the District VIII Advisory Council, he was selected to participate in the ACOG leadership program, now called the Cefalo Leadership Institute. He served as District VIII treasurer for two terms, during which he participated in the expansion of the district to include Central America. He served as District VIII vice chair and chair. While chair, he served on the Executive Boards and the Council of District Chairs. He currently serves on the national Appeals Panel Committee and the Executive Board, where he has served on the committees on Credentials, Professional Liability, Nominations, and Gynecologic Practice.

Dr. Kopelman has served Colorado as president of the Colorado Perinatal Care Council and as a member of the state board of medical examiners. Being given the opportunity to participate in the governance of ACOG and The College, Dr. Kopelman broadened his experience in the areas of legislative activity, government regulations, and the entire range of national health care policy and financing.

DISTRICT IX

Bruce B. Ettinger, MD, MPH

Dr. Bruce B. Ettinger retired from clinical practice in 2003 to become a full-time medical consultant for regulatory compliance to the Los Angeles County Department of Public Health. In this role, he served as a federally certified surveyor for patient safety and quality of care in hospitals, ambulatory surgery centers, and skilled nursing facilities.

Dr. Ettinger received his medical degree from the State University of New York at Buffalo and his master’s degree in health services administration from the University of California, Los Angeles (UCLA) School of Public Health. He completed his residency training in ob-gyn at the University of Texas in San Antonio, followed by serving two years in the US Air Force during the Vietnam Era. When in practice, Dr. Ettinger focused on improving access to care for underserved women in public, private, and academic settings. This included developing educational programs in women’s health at the Harbor/UCLA Medical Center and the Martin Luther King Jr/Drew Medical Center.

For ACOG, he serves District IX as a member of the Legislative, Patient Safety, and Physician Wellness committees and was the founder and chair of the district Committee on Health Care for Underserved Women. Nationally, he was a consultant for the former ACOG Division of Women’s Health Issues for the development of educational programs and publications on domestic violence, elder abuse, and depression in women. He served as a member of the national Committee on Health Care for Underserved Women.

Currently, he represents ACOG with the National Health Collaborative on Violence and Abuse. Since 2007, he has contributed to the Annual Clinical Meetings as a luncheon conference moderator or poster presenter on topics in patient safety and presented a clinical seminar on “Sexuality in the Elder Woman” during the 2012 ACM.

ARMED FORCES DISTRICT

Randal D. Robinson, MD

Dr. Randal D. Robinson is a professor of ob-gyn in the Division of Reproductive Endocrinology at the University of Texas Health Science Center in San Antonio, where he also serves as the reproductive endocrinology and infertility fellowship director. He is a professor of ob-gyn at the Uniformed Services University of Health Sciences in Bethesda, MD. He received his medical degree from the University of Missouri, completed his residency at Madigan Army Medical Center in Tacoma, WA, and completed a fellowship in reproductive endocrinology and infertility at Harvard Medical School, Brigham and Women’s Hospital in Boston.

For ACOG, Dr. Robinson is chair of the Army Section of the Armed Forces District and previously was the vice chair of the section. He also is the vice chair of the Council on Resident Education in Obstetrics and Gynecology (CREOG) and serves on its Executive Committee. He was vice chair and a member of the CREOG Education Committee.

Dr. Robinson previously served in the US Army in the Medical Corps and retired at the rank of colonel in March 2011 after more than 26 years. He served as chair and residency program director of ob-gyn at the San Antonio Military Medical Center and the San Antonio Uniformed Services Health Education Consortium (SAUSHEC). Dr. Robinson was the ob-gyn residency program director for the integrated SAUSHEC military residency program in San Antonio from 1997 to 2010. He was the department chair from 2006 to 2010 and also served as the medical director and chief of reproductive endocrinology and infertility at these institutions. Dr. Robinson is a board examiner for the American Board of Obstetrics and Gynecology.

DISTRICT XI

Eugene C. Toy, MD

Dr. Eugene C. Toy is the vice chair of academic affairs and residency program director at the Methodist Hospital of Houston, TX, and the Dunn S. Dunn Sr academic chair and medical director of three clinics at St. Joseph Medical Center in Houston. He managed his medical practice with a budget of more than $5 million. He received his medical degree from Baylor College of Medicine, Houston, and was inducted into the Alpha Omega Alpha Honor Society. He received his graduate training in family medicine at Ventura County Medical Center (UCLA Affiliate) in Ventura, CA, and practiced family medicine for two years.

Dr. Toy then received his second graduate training in ob-gyn at the University of Texas Southwestern in Dallas, where he taught as a clinical professor and clerkship director. For ACOG, Dr. Toy currently is the District XI secretary and program chair. He was on the District VII Advisory Council. When the Texas Section of District VII became District XI, he served as chair of Section 4. Dr. Toy has served on the Committee on Nominations several times. He has served as an expert in ob-gyn ultrasonography on various national committees.

Dr. Toy is the past president of the Texas Association of Obstetricians and Gynecologists. He is the author of more than 20 medical books in the specialty and has contributed to the Annual Clinical Meetings several times. He has served as an expert on domestic violence and on various national committees.

Namesake to deliver inaugural Hale Lecture

The newest endowed lecture at the Annual Clinical Meetings is named for Ralph W. Hale, MD, The College’s former executive vice president, and, appropriately, Dr. Hale will deliver the inaugural lecture himself.

“The Hale Lecture, ‘The Obstetrical Forceps—Evolution to Extinction?’ will reflect Dr. Hale’s interest in history by focusing on the use of forceps and why they have become almost extinct. The Hale Lecture will be presented from 12 to 1 pm Wednesday in room 6B.

“One of the things that has been extremely important in the development of our specialty was the use of forceps as it came from basic midwifery into a scientific specialty,” Dr. Hale said. “But what has happened is that the use of forceps, for medical and legal reasons, has virtually disappeared in most areas. I thought I would give a presentation on the history of forceps from its beginning of the specialty until what I see as its almost period of extinction.”

Dr. Hale is a student of history—The College’s museum is named for him—and he has been given the opportunity to bring this interest to the field of obstetrics and gynecology.

Dr. Hale’s career began in the 1980s, when Peter Chamberlen—known as Peter the Elder—advanced the use of forceps in England. His clinical advancements were not shared with other doctors, but only with his family, starting with Peter the Younger. The Chamberlens were so secretive that they delivered babies while cloaked under a sheet.

“The use of forceps became easier and easier, and they were safer, and forceps threatened to go the way of the dodo,” Dr. Hale said. “That is one of the reasons it is almost extinct. The worst thing you could do is to try a forceps delivery without being taught how to do it and having the experience to do it.”

WEDNESDAY, MAY 9
College Honorary Fellowships Announced

Honorary Fellowships are awarded to those individuals of outstanding achievement in the field of obstetrics and gynecology, or an allied discipline, from any country. The individual has attained national and international recognition and has a relationship with activities in the United States involving women’s health care.

Kwabenya A. Danso, BSc, MB ChB, FWACS, FGCS
Professor Kwabenya A. Danso is a professor of obstetrics and gynecology at Kumasi, Ghana. He received his medical training from KNUSTSMS and fellowship certification in obstetrics and gynecology at the West African College of Surgeons. He has had several academic leadership positions at the university, including chair of obstetrics and gynecology, vice dean, dean, and acting provost of the College of Health Sciences. Professor Danso is a member of the Ghana Medical Association, the Society of Gynecologists and Obstetricians of Ghana, and the University Teachers Association of Ghana. He is a founding fellow of the Ghana College of Physicians and Surgeons and the Reproductive Health and Family Planning subspecialty program. He also teaches strategic leadership and management for health systems transformation in the master’s of public health and the master’s of science programs at Kwantum University of Science and Technology. He is an examiner for the University of Ghana Medical School and for the fellowship examinations of the West African College of Surgeons and the Ghana College of Physicians and Surgeons.

Professor Danso has made several academic exchange trips abroad, including the University of Ulm Women’s Hospital and Polyclinic in Ulm, Germany, in November 2001, and was the Alfred C. Beck and Rhea B. Beck Visiting Professor to the obstetrics department at the University of Michigan Medical School in May 2007. Professor Danso’s interests are in medical education and reproductive health issues in the areas of obstetric fistula, safe pregnancy and birth, unsafe abortion, and vertical transmission of viruses. He has been invited to speak at numerous international forums about pregnancy complications. He has published several peer-reviewed articles in local and international journals and is a contributor to six textbooks and training manuals. He also reviews several renowned journals.

Anthony D. Falconer, DM, FRCOG
Dr. Anthony D. Falconer is the president of the Royal College of Obstetricians and Gynaecologists (RCOG) in England. Prior to that, he was the RCOG senior vice president and international officer, during which time RCOG raised its profile in international advocacy. Senior political ties were established with the Department for International Development (DFID), and the work with the Liverpool School of Tropical Medicine flourished with the award of a large grant from DFID.

Dr. Falconer received his medical degree from the University of Bristol and began training in ob-gyn at the Simpson Memorial Maternity Pavilion in Edinburgh, Scotland. He worked as a general medical officer in Kalulushi, Zambia, and was appointed registrar and later a lecturer in physiology and pharmacology at the University of Nottingham in the UK. While at Nottingham, Dr. Falconer submitted a paper for his DM degree, investigating sympathoadrenal responses in the fetus. His final year of training was at Groote Schuur Hospital in Cape Town, South Africa. He was appointed consultant to the Plymouth Hospitals in 1986. He made a major contribution within the region to the development of cancer services and hysterectomy by being a co-author of the first paper supporting the use of this technique in an outpatient setting.

Dr. Falconer was clinical director and division director at Groote Schuur Hospital, where he maintained a major interest in training young doctors. Dr. Falconer has assisted British and European parliamentarians, governmental select committees, nongovernmental organizations, and many other groups in addressing global issues related to women’s health care. He has mentored a safe motherhood project in Kenya under the auspices of the International Federation of Gynecology and Obstetrics. Dr. Falconer has published numerous peer-reviewed articles and delivered many lectures internationally.

College Distinguished Service Award winner announced

The College Distinguished Service Award was created in 1968 and is presented to outstanding individuals in obstetrics and gynecology who have made significant contributions to The College and/or the discipline of obstetrics and gynecology in government, research, teaching, or direct patient care.

André B. Lalonde, MD, FRCSC
Dr. André B. Lalonde served as executive vice president of the Society of Obstetricians and Gynaecologists of Canada (SOGC) for more than 20 years and had appointments as a clinical professor of obstetrics and gynecology at the University of Ottawa and McGill University and adjunct professor in health administration at the University of Ottawa. He is a graduate of the University of Ottawa and earned a master’s degree in health planning and financing from the London School of Economics. He is a founding member of the Partnership for Maternal, Newborn, and Child Health and has participated on various World Health Organization expert panels.

Dr. Lalonde has been instrumental in developing the strong collegial relationship between ACOG and SOGC. He was on the ACOG committees on Global Women’s Health and Continuing Medical Education. He also served on the Presidential Task Force on Neonatal Encephalopathy and Cerebral Palsy. He has been responsible for the development and implementation of several maternal and newborn care risk management programs that are currently implemented across Canada (MORE® and ALARM). He is a member of numerous professional organizations and has earned honorary fellowships in many of them. The secretary general of the United Nations acknowledged his outstanding contribution in the development of the global strategy and funds for Safe Motherhood and Newborn Health. His expertise includes the implementation of safe motherhood programs, reduction of maternal morbidity and mortality programs and audits, management of clinical services in hospitals, risk management, sexual reproductive health, and partnership programs with low-resource countries. Dr. Lalonde has lectured extensively around the world, developed programs on capacity-building, and is the coauthor of landmark textbooks on postpartum hemorrhage and sexual reproductive health.

Support the College Development Fund

Join Dannon® in supporting the American College of Obstetricians and Gynecologists Development Fund. For every signature that attendees leave on the Dannon Signature Wall at the Dannon booth, #829, in the Exhibit Hall, the College Development Fund will receive a $10 donation from Dannon® ACTIVIA®.

Medical student reception

Ob-gyn medical students get to know one another and mingle with Junior Fellows and young Fellows at the Medical Student, JFCAC, and Young Physician Reception Monday night.

André B. Lalonde, MD, FRCSC

Kwabenya A. Danso, BSc, MB ChB, FWACS, FGCS

Anthony D. Falconer, DM, FRCOG
New DVD addresses emotional effects of adverse events

When an adverse event occurs, it can cause intense emotional distress for ob-gyns at all levels, whether or not there was a medical error. A new ACOG DVD, “Healing Our Own,” aims to initiate discussion and provide support for clinicians dealing with serious and unexpected adverse events.

In the DVD, ob-gyns describe the painful effect adverse events have had on them and how they recovered. The program was conceived by the Junior Fellow Congress Advisory Council (JFCAC), “Our goal for this program is to help change the culture surrounding adverse events by creating an awareness of how physicians respond to them and how we can do better,” said Cynthia Brincat, MD, PhD, JFCAC past chair.

“Healing Our Own” can be viewed on computers at the ACOG Booth in the Exhibit Hall. It will be shown on a larger screen in the ACOG Booth, #1010, at 11 am today. The video can also be viewed in the members-only section of the ACOG website at www.acog.org/adverse-events and purchased at the ACM Bookstore. All ob-gyn residency program directors were mailed copies to view with their residents.

Noted nephrologist to present history of preeclampsia during Harer Seminar

The history of preeclampsia will be presented from a different perspective during the Benson and Pamela Harer Seminar on History from 11 am to 12 pm today in Ballroom 20.

Marshall D. Lindheimer, MD, will present “The History of Preeclampsia as Seen by a Nephrologist.” He is a professor emeritus of medicine, obstetrics, and gynecology and clinical pharmacy from the University of Chicago’s Medical School.

He will cover developments in preeclampsia from its presumed earliest recognition among various cultures more than 4,000 years ago to this ACM, where it was the focus of Monday’s President’s Program from ACOG President James N. Martin, Jr, MD. “This is the first ACOG meeting whose presidential theme was preeclampsia,” Dr. Lindheimer said.

His lecture will focus on the colorful history surrounding preeclampsia and eclampsia, “the disease of theories.” His nephrologic perspectives will not only explore the historical perspectives of hypertension and proteinuria, but it will contain some philosophical digressions of how to think about these areas. Following the lecture, attendees will be familiar with the history that led to the delineation of preeclampsia as a disease specific to pregnancy, its evolution from a disease of theory to emerging evidence of definitive causality, and the history of attempts to prevent and treat the disease.

Dr. Lindheimer has studied the kidney and hypertension in pregnancy, focusing on preeclampsia throughout an academic career now in its 42nd year. He is a founder of the International Society for the Study of Hypertension in Pregnancy and has written many articles and edited several books on the subject, including the last two editions of Chesley’s Hypertensive Disorders in Pregnancy.

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