

COMMUNIQUÉ

The Newsletter for the Kitsap County Medical Society

Fall 201

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MARK YOUR CALENDAR

Fire and Ice

Kitsap Fairgrounds Pavilion October 15, 2011 at 5:30 PM

New Members Gathering

11.11.11 at 5:30 PM The home of Dr. Glen and Rebecca Carlson

KCMS Family Holiday Party

December 4, 2011 at: 4:00 PM Kitsap Golf and Country Club

WSMA HOD Meeting

January 23, 2012, 8am – 5pm Red Lion Olympia Hotel, Olympia

Family Fun Run!

"NEW DATE & LOCATION"
Sunday April 29, 2012 at Noon
Fairgrounds PRESIDENTS HALL

The Study of Man

Written by, Greg Duff, MD ~ KCMS President



Grea Duff and his son Finnegan

For the past month I have been left with the charge of writing a piece for the Communiqué as acting President. Three times I have written the essay: once about the changes in medicine, once about my sports medicine evolution in Kitsap County and now this last version.

In the end, I posited this version a

better read. Forgive me if I was wrong.

Gone are the college days when essays were developed over hours and completed in an evening. The old tools are rusted stiff. The only vocabulary development comes from reading the Economist on the occasional plane ride. So many word meanings lost and forgotten. My mind is devoid of the ability to think and process profound thoughts of yore. So this writing in the end will expose the influence of David Tinker's essays in the Communiqué written back when I first came to town. Personal contemporary reflections.

Cleaning the garage, I stumbled upon a college essay referencing Michael Polanyi's "The Study of Man". Despite a good grade on the paper (meaning it made sense to sorneone), I couldn't understand a single sentence. "Is Polanyi simply attempting to persuade each individual reader that he or she need merely dwell within the framework of Polanyi's hierarchy of realities in order to understand, and, subsequently, arrive at the closest proximity to the right truth given the limitations of being human?"...What??? I even lack the hunger to try and understand, decipher. What got me out of bed or kept me out of bed 27 years ago appears to have expired. The only remnant was the conclusion I drew from all those reflections and struggles to understand: the spine of life's meaning is responsibility. After a hundred thousand dollars of education I learned the same message for four dollars in a movie theatre watching Spike Lee's "Do the Right Thing."

It shouldn't be a surprise then to hear much of my current soul searching and pearls of wisdom stem from the editorials in Orthopaedic journals. The most recent self-realization came from an essay in Orthopaedics Today written by our current Academy president Terry Canale. Dr. Canale wrote an incredibly reflective and poignant essay on his life as an internationally acclaimed Orthopaedic surgeon.



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Fall 2011

The Study of ManFront Page
KCMS Executive Board2
The Study of Man continued3
KCMS Member Advocates for a Worthy Cause!4
WSMA House of Delegates Report6
Medical News! 7
Me Retire? Dr. Sue ReimerCenter Section
Stanley Serbousek & Harrison Medical Center Assistant Chief of Staff Nominations11
Inspired!12
Fire and Ice, Twilight Zone!
Fitness Warrior Alicia Cole14 KCMSF Helps Citizens Brand Themselves as Athletes15
Welcome New Members & Save the DatesBack Page

KCMS Executive Board



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The Study of Man con't from cover page

He wrote of his childhood dream and ambition to become such a recognized academician. Then he wrote of his distant relationship with his adult children. He posited that as physician we are likely to adjust to our diminishing income by working harder. His wisdom to us was to accept the financial loss and spend time with our families (read Carpe Diem).

My dad, an Orthopaedic surgeon and a child of the Great Depression. became the contemporary equivalent of Canale in most ways and came to realize the ideal of his generation: hard working physician, loving

father. Still there are siblings who remember nothing but his absence. There has been a cultural shift. As reflected in Canale's essay, family, more specifically time with family, should now be considered paramount. Having embarked on this journey as physician and surgeon under the old model, I struggle to discern why the shift occurred. Is it simply the natural evolution of our profession? Is there truly an absolute right way and wrong way to move through life and how do you know without considering the context/era in which one lives?

Relationships and the people that fill them are the indulgences of life. The most rewarding element of practicing medicine is that new relationships are developed every day. We come to these new meetings focusing our energies on helping the person in front of us. These patients will then often extend themselves to give us thanks. Sometimes in seemingly innocuous exchanges as my unfolding story will relate.

Finishing Canale's essay, I sat at my office desk staring at my computer screen. There were five or so post-its attached most telling me what task I had yet completed. But there was one that read, "third week of august, kite festival, Long Beach". "You should



take your boys there," a caring patient had related months prior. Looking at what remained of the boys summer break, I realized I had not scheduled off any more time with them. The last week of August iust before school started would be a killer week of county call.

And so my story begins. The office found me a block of time to escape. Got home on Thursday around 10:30 pm after clearing my desk. The boys had pulled out most of the camping gear. Kim, loving mother and wife put together survival bag, as she would be anchored to her work desk for the weekend. Up at 6 am with car packed for camping by 7 and on the road

minutes later. Five minute stop at Starbucks for a quad espresso. Three hours later, we rolled into Long Beach, Washington, Had an amazing lunch together in the neighboring fishing village of Ilwaco. Off to the kite festival for initiation. Made camp at an RV site only those who have read Another Road Side Attraction could appreciate. Probably oddest campsite ever. Boys were oblivious. Dinner of boiled hot dogs (forgot the buns, ketchup and mustard –boys were oblivious). Back to the main strip for go carts, ice cream and more kite shopping. At 9 PM the Night Kites were flown behind a backdrop of fireworks....in a dense fog – boys were oblivious. Temperature had dropped below fifty by 11 PM, bedtime. Boys were not oblivious to the temperature as they have Styrofoam sleeping bags. But not a tinge of complaining. "Best night of sleep camping ever" was the morning chorus. Off to Cape Disappointment (1 still laugh every time I say it). Lewis and Clark Interpretive Center and lighthouses. Back to kite festival for final purchase of kites after hours of shopping. Kite flying and the rest of the story belong to pictures attached.

Michael Polanyi and Terry Canale were absent from the Kite Festival but credited accordingly. My dad was there in spirit for sure. I am now left to wonder how differently I, and you, will view the world of

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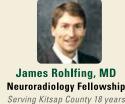




Bradley Brown, MD Body Imaging & Ultrasound Fellowship Serving Kitsap County 14 years



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KCMS MEMBER ADVOCATES FOR A WORTHY CAUSE!

Article written by: Michael Cook, MD

I've been a member of The Bremerton Boys & Girls Club board for the past 7 years. The board was formed to raise funds for and to build the Naval Avenue Boys and Girls Club located on the campus of the Naval Avenue Elementary School in Bremerton. The Club has been open since 2006 and has quickly grown to an enrollment of 600 kids with an average daily census of 110. We are now in the middle of a campaign to build a teen center in East Bremerton just off of Wheaton Way near Albertson's.

The Boys & Girls Club's mission is to enable all young people, especially those who need us most, to reach their full potential as productive, caring and responsible citizens. The Club provides five key elements to facilitate youth development including: safe, positive environment; fun; supportive relationships; opportunities & expectations; recognition.

In Kitsap County there are currently three Club sites, one in Bremerton and two in Port Orchard serving elementary-aged youth. As an organization, the Club serves ages 6-18. The Bremerton Branch is expanding to serve teenagers in the community and provide continuity from the elementary program by providing existing members a place to go when they advance into middle and high school. This building will be 10,000 square feet off of Wheaton Way on the campus of the old East High school, next to Albertsons. In partnership with the Bremerton School District and the City of Bremerton, this new site is part of a larger project known as the Youth Wellness Campus, which includes the existing gymnasium, the Kitsap Community Co-op, the Bremer ton School District Kitchen and Nutrition Center, and the Boys & Girls Club Teen Center.

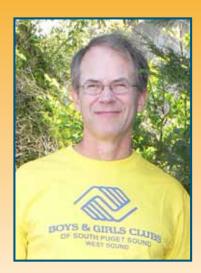
The Club will focus on three areas: Academic Success, Character and Citizenship, and Healthy Lifestyles. Academic Success involves tutoring and homework but beyond that it is access to higher education and assistance in college or vocational applications, particularly financial aid. In order to accomplish this the Boys & Girls Club is planning to partner in the new building with the College Success Foundation to assist the 1300 high school graduates in the county who are eligible to receive College Bound Scholarships. During daytime hours the Teen Center plans to provide a coffee-shop space to serve those who are not currently in school, staffed to provide assistance in resume-building, college and vocational program applications, FAFSA forms, scholarships, studying for college placement tests, and tutoring. This is designed based on a program in San Antonio called Café College, and will help those not in high school to gain access to higher education in the surrounding area.

In dealing with **character and** citizenship The Boys & Girls Club realizes that when working with teens many times there are exacerbating circumstances keeping them from realizing their full potential academically. These issues can range from conflict at home between parents or guardians, trouble making friends, uncontrolled anger, problems with authority, racial discrimination among peers, and many others. In order to help mediate these struggles and help build coping skills the Club is planning to partner with the Dispute Resolution Center, based in Silverdale. This volunteer-based organization provides a wide array of conflict resolution trainings, peer mediation, victim-offender resolution, and training for staff in de-escalation techniques. These trainings and consultations can be one-on-one or small groups and are invaluable to the success of the programs within the Club experience, keeping all teens emotionally and physically safe, while also building life skills.

Healthy Lifestyles deals with issues surrounding healthy eating and exercising, drugs and alcohol abstinence, sexual activity, abusive relationships, and peer pressure. The Club provides programs including Smart Moves, which works with groups of males and females separately to talk about the decisions they are facing in the community and at school. The Club is planning to partner with the YWCA to provide guest speakers on topics including dating violence, safe sex and issues affecting women and young girls. The Club will also provide a referral system within the community to help those teens suffering from drug abuse or other negative behaviors.

Bremerton, and Kitsap County at large, will benefit when the Teen Center opens in 2013. I encourage anyone who is interested in supporting this project to email me at:

mmikecook@comcast.net or call me at 360 479-2042.



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WSMA HOUSE OF DELEGATES REPORT

Written by: Dr. Anita Alvestad McIntyre, KCMS/WSMA Delegate

Members of the KCMS board and delegates attended the WSMA meeting in Spokane the second week of September. Your delegation submitted three resolutions for consideration:

- 1. Lack of interoperability of EHR systems
- 2. Reimbursement disparities between hospital based & clinic based care
- 3. Improving uniformity in hospital outcome/quality measurements

Our payment disparity resolution generated considerable discussion. Physician representatives from Medicare, physician hospital administrators and hospital based and private practice physicians discussed the rationale for the disparity and its economic and social consequences. The WSMA board of trustees was tasked to explore the issue

EHR brought out a storm of controversy. Though it would be nice for EHR to have the ability to share information seamlessly, there were some in the audience who felt that too much information in this age of identity theft could spell disaster. EHR seemed to be a hot topic at this year's meeting. The EHR resolution was amended to emphasize the importance of system interoperability and adopted for action Our third resolution was addressing the faulty system of reporting outcomes and encouragement of educating the public on what these statistics mean. (F ex. ventilator infection rates) Though many appeared to agree there is a problem, others felt that we should continue to report these statistics as a matter of transparency. The resolution addressing bias in hospital outcome measurements was defeated.

This was a very eye opening experience for me in my first year as a delegate. As the day went on my excitement grew. As I listened to comments of our colleagues I realized how passionate people can be and I appreciate the dedication they have in pursuing these resolutions. It is encouraging to know that grass root efforts in a small county can

be brought to state level and then beyond to the national level for consideration. This is a part of medicine I had never experienced. The newly inducted WSMA president Dr. Doug Myers gave opening remarks on the last day of the meeting. He being a 9th generation physician and a solo self-employed physician gave some words of advice for the upcoming generations of physicians who are going straight into hospital based practices. He advised we continue to get involved because in Thomas Jefferson's words, "Government big enough to supply everything you need is big enough to take everything you have ... The course of history shows that as a government grows, liberty decreases."

So with these words of wisdom I encourage all of you to get involved. Members interested in submitting resolutions for the 2012 meeting or serving as a delegate should contact KCMS Executive Director; Rebecca Carlson.

Thank you for your attendance, leadership and hard work at the 2011 WSMA HOD Session!

Washington State Medical Association

Physician Driven

KCMS House of Delegates Attendees:

Greg Duff, MD ~ KCMS President and Delegate

Paul Kremer, MD ~ KCMS President Elect and Delegate

Mike Cook, MD ~ KCMS Vice-President and Alt Delegate

Melissa Lo, MD ~ KCMS Secretary-Treasurer and Alt. Delegate

Mike Armstrong, MD ~ KCMS Immediate Past-President and Delegate

Glen Carlson, MD ~ KCMS Past President and Alt Delegate

Bill Bauer, MD ~ KCMS Delegate

Anita Alvestad-McIntyre, MD ~ Delegate

Rebecca Carlson ~ *KCMS Executive Director*



Extra, Extra, Read all about it! MEDICAL NEWS!

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News in Ophthalmology in Kitsap County 2011

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Ophthalmologists in Kitsap County offer new vision correcting intraocular lenses and improved treatments for macular degeneration.

Cataract surgery patients can now select customized intraocular lenses to reduce their need for glasses after surgery. Multifocal and astigmatic correcting lenses offer the same safety profile of traditional intraocular lenses while reducing the need for spectacles.

Intravitreal VEGF binding agents can treat and often restore vision in patients with neovascular forms of macular degeneration. Patients may require injections in the office several times per year.

Treatment with Flomax and other alpha blockers may increase the risks of cataract surgery. These drugs are strongly associated with 'floppy iris syndrome' which can complicate both the surgical procedure and recovery.

News in Orthopaedic Care

Computer Assisted total knee replacement assists surgeons by setting templates for alignment and bone cuts to increase the accuracy of component positioning.

Early repair of ACLs in adolescents while growth plates are open reduces incidence of meniscal damage and future arthritis.

Total ankle replacement is now offered locally. Total shoulder patients are generally discharged after one night.

News in Radiology in Kitsap County 2011

NAME OF TAXABLE PARTY.

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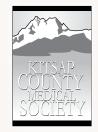
eyer, the news much

Radiologists in Kitsap County now offer MR directed prostate needle biopsies. MR provides high detail imaging to direct biopsies to the area of abnormality.

Three dimensional digital mammography produces highly detailed thin sliced images of the breast to increase diagnostic sensitivity. Breast Sheer Wave Elastography creates highly reproducible images to distinguish elastic benign breast lesions from inelastic breast cancers.

Other imaging studies being offered now are nuchal thickness measurements to screen for birth

defects, carotid intimal thickness screening and MR defecography to evaluate pelvic floor disorders.



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Written by: Dr. Sue Reimer



For years whenever I told my sons that I could never imagine myself retiring, they would look at me with uncomprehending amazement. I would try to explain how retiring would make me feel old, unfulfilled, and useless. I used tired clichés like "an old mare being put out to pasture" and "wanting to go out with my boots on." I think many of my colleagues in the medical community understand exactly how I feel. So much of our identity is wrapped up in being

a physician that we wonder who we will be without that distinction. I think we fear we will lose a bit of our soul.

So why did I retire? The simple answer is the time was right. I have truly loved taking care of two generations of Kitsap County children but I had accomplished all I set out to do when I started medical school. My husband, Ron, knew while I was pursuing a PhD program in human genetics, so many years ago, that I was not patient enough for laboratory work and would enjoy the challenges and thrills of medicine. He knew I was meant to be a doctor before I did and I'm forever grateful for the encouragement he gave me to pursue that dream. That dream carried me through 31 years but gradually started to fade. Medicine has changed so much since my career began that I was finding myself nostalgic for "the good old days". The bur-

Kitsap Children's Clinic Staff

den of night call, the long weekends answering calls from worried parents, the juggling of hospital and clinic work, the transitioning to the EMR, and the shift in pediatrics from infectious disease to psychosocial issues finally just wore me down.

Medicine in Kitsap County in 1980, when Ron and I first came to town, was quite different. Ron bravely set up his own single practice in a small, renovated firehouse on Sheridan while I joined two other pediatricians in a decrepit second floor office on 4th Street in downtown Bremerton. The hours were long and the pay pretty bad but it was, well, fun. The older physicians welcomed us to town and we quickly found camaraderie with the other young docs opening their practices. Because lab tests were not so sophisticated or available, we relied on a good history and physical exam. Raised on Nancy Drew mysteries (no Harry Potter back then) I looked at each case as a mystery to solve. The ER was small and only staffed parttime so the community doctors would go in to see all their own patients. I can't count how many kids with ear infections and sore throats I saw in the middle of the night. To prevent some of those middle of the night trips to the ER our clinic stayed open until 9 PM. I recall a few nights each winter when I would finish seeing my 40th patient of the day at 11 PM, alone in the office.

The old nursery in the Bremerton Hospital (no medical center then) was filled with babies because "rooming in" was not yet the thing. The c.section rooms were not connected to the nursery and we would have to run down a long hallway bagging a sick baby with the stunned family clearing a path. We admitted and managed kids that few community pediatricians would take care of today. Bacterial meningitis, sepsis, epiglottitis, diabetic ketoacidosis, nephrotic syndrome, status epilepticus--- we were brave and really had no option, so we did it, even if it meant staying by the bedside all night monitoring vital signs and labs. We did our own procedures from chest tubes and spinal taps to supra-pubic taps and usually started our own



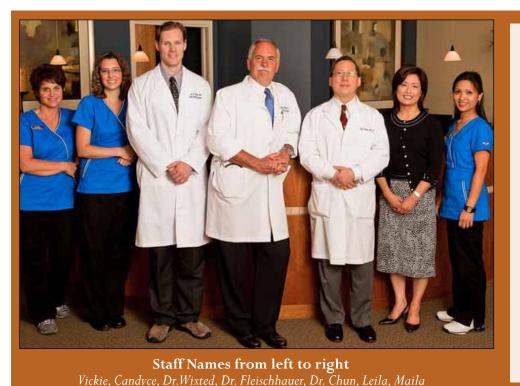
IVs. Remember the days of rigid, butterfly scalp IVs taped to those babies' heads, crowned with a tiny medicine cup that we liked to call their party hats? Heck, I even gave all my own immunizations the first few years in practice since we had no RNs or trained MAs. There were no pulse oximeters then so we pediatricians got very good at seeking out those tiny radial or brachial arteries for blood gases. We were "country docs" who tried to do it all and only referred the most critically ill of patients. Medicine has become so complex and specialized that it isn't, and rightly so, the standard of care now. As we refer more kids to tertiary pediatric centers with residents, hospitalists, and intensivists, our in-patient skills become rusty. We get nervous that the next middle of the night call will be from an OB delivering 28 week twins and, good grief, I haven't intubated a baby that small in years. And what are those ventilator settings again?

Yes, we worked hard but somehow it seemed more like medicine and less like secretarial or transcription work. We didn't discuss "work-life balance" (that phrase hadn't been invented then) but we somehow found time for our families and most of our kids turned out just fine. I hope my generation of docs was a good role model and inspiration to our children, even if not always able to be present at every Little League game. Medicine has changed and change, of course, is inevitable. Some of the changes are good but not all. I fear that continuity of care, which is such an integral part of the

human need, is being lost with the fragmentation and digitalization of medical care. Are emails and text messages as meaningful as a face-to-face conversation? The term "healing touch" means hands on the patient, not fingers on the mouse. There was an art to medicine that I fear may get lost in the maze of technology that surrounds us. So how do we preserve the humanity of medicine in an era of digital medicine and fragmented, episodic health care? How to combine the wonders of modern technology without losing the human touch? That is the challenge we senior physicians pass on to the next generation.

For my generation this is the time to reinvent and rediscover who we are. To keep our souls intact, I think we'll still need meaningful and purposeful work and new challenges, but that can take many directions. For me it means taking my medicine to help children in foreign countries. It means locum work at the Kitsap Children's Clinic and elsewhere. It means painting more often and creating a watercolor series to hang in Silverdale Harrison. It means volunteer work including setting up a Reach and Read program at my clinic. It means traveling to India, Nepal, Bhutan, and New Zealand. It means trying to break 90 at White Horse Golf Club. Mostly, it means more time with family that now includes grandkids.

Retired? I'm likely to be more tired that re-tired. No pasture for me!



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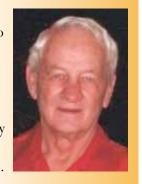
Bremerton

Suite 1240



Stanley Anthony Serbousek Dec. 24, 1935 ~ Aug. 25, 2011

The Kitsap County Medical Society wishes to send our sincere condolences to the family of Dr. Stanley Serbousek. Dr. Serbousek, a lifetime KCMS Member past away August 25, 2011 while on a fishing trip in Alaska. While on this earth he



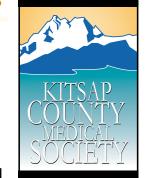
was a loving, caring father, physician and friend, accepting every one he knew as family.

In 1970 he joined Kitsap Children's Clinic in Bremerton. Twenty years later he opened his own clinic, Central Pediatrics. After his retirement, he retained his medical status by working as a Locum Tenens Pediatrician across the country.

He was preceded in death by his parents and four brothers, Don, Dick, Rodney, and Bill. He is survived by his wife Mary, and sons David and Steven, daughters Jill and Amy (Bernard) Dyers and grandchildren Richelle Angelone, Nicholaus Baxter, Lindsay Serbousek, Tyler Baxter, Quentin Dyers, and Courtney Dyers, and great-grandchild, Hood Baxter.

Harrison Medical Center Assistant Chief of Staff Nominations

The new Harrison Medical Staff bylaws will allow the KCMS to have a seat on the Nominating Committee for the Assistant Chief of Staff position. This Nominating Committee seat will be filled by the current President of the KCMS or his designee. This committee is tasked with reaching a consensus on the best possible nominee(s) and recommending them to the entire Medical



Staff for approval by vote early next year. Other candidates can also be nominated by direct petition by the Medical Staff. The Assistant Chief has a two-year term and then becomes Chief of Staff for two years, then Immediate Past Chief of Staff for another two.

The Assistant and Chief of Staff meets regularly with Harrison's administration, the Hospital Board and Executive Committee and receives a modest stipend. These are critical leadership positions in our hospital and it is vital that the KCMS and your interests are considered in this process. For a more complete list of the responsibilities of these positions contact Mickey Sanders at mickey.sanders@harrisonmedical.org or 360 744-6524

The KCMS is currently soliciting nominations from our members for the Assistant Chief position. Final selection of the physician whose nomination we will endorse will be made by the KCMS Board. Please forward your nominations to Rebecca Carlson at kcmsmed@gmail.com or 360.689.2928

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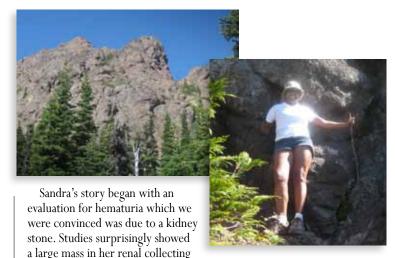
Inspired!

Written by: Dr. George Evanoff

I have come to appreciate over the years that we frequently encounter challenges that reintroduce us to the important lessons of life. My wife recently helped me realize the importance of the determined spirit that we use to help us achieve the successes in our lives.

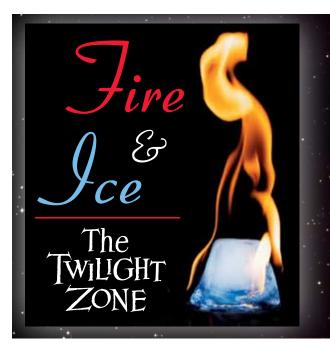
Sandra and I had determined that we would use our free time this summer to explore some of the natural beauties that we live among here in the Northwest. We have had the chance to go on a few leisurely hikes on the Olympic Peninsula. One recent weekend we decided to try something a little more challenging. We were inspired by a little trek we had made with Sandra's sister and brother-in-law when they visited us last summer. We had hiked from Hurricane Ridge past Sunrise Point along a narrow trail. It wasn't particularly steep, but we didn't complete our objective of a visible nearby peak due to lack of supplies, namely water. Later research revealed that our goal was Mount Angeles. The hiking manuals that I read didn't really elaborate much about the route or the physical challenge of the trail, but it had seemed not to be such a difficult trail when we had viewed it from a distance. Armed with our small backpack with modest supplies, we set out from Hurricane Ridge late one sunny Saturday morning.

The wildflowers were in full bloom due to the late appearance of our summer. We took in the sites of several deer near the Visitors' Center and even had a not too close encounter with a black bear as we hiked along the trail through the trees toward Sunrise Ridge. As we moved along the trail, we passed several hikers presumably returning from our destination. They all looked pretty worn, but I assumed it was just because they weren't so physically fit. When we finally reached the point in the trail that I had presumed from afar to be our destination, I realized that there was in fact a valley separating us from the mountain. We hiked down the trail and up the other side of the valley to the base of the mountain. Already feeling the fatigue of the longer than expected hike, we took a break to fuel up for the final surge up the mountain. It was here that we met two younger submariners who had reached the same point by hiking up a shorter but steeper switch back trail. Each of our two pairs took turns leading the other up the steep trail. Our legs were already feeling the fatigue of the climb when we literally came up against a rock wall. We were all having second thoughts about continuing to climb when Sandra shared with our new found climbing partners that she had undergone a major surgical procedure about 9 months earlier. With that inspiration, we continued through the final rocky course to the peak. After taking in the vistas of the Olympic and Cascade ranges, we all descended to the point where we had met the other pair of climbers. They offered their gratitude to Sandra for sharing her story as it had clearly strengthened their resolve to complete the climb.



system. Fortunately there was no evidence of metastatic disease. Having been trained and practicing as a nephrologist for over 25 years, I was able to understand the seriousness of this finding. While this knowledge helped us to accept the diagnosis and proceed with treatment, it really doesn't prepare one completely for the emotions of sitting on the other side of the consultation table. Sandra subsequently underwent a lengthy procedure to remove the kidney, ureter, and a small section of the bladder. Within one month, she was recovered to the point that she was able to resume her volunteer work by performing massage therapy for the oncology patients and their family members at Harrison Medical Center. About 8 months after her surgery, she was preparing a Brazilian dinner party which she had offered for auction at the Fire and Ice Dinner and Auction supporting the KCMS Association. She had insisted on participating in the dinner and auction despite having just learned of her tumor and the planned surgery. This charitable event has become especially special to Sandra since she arrived in Kitsap County after our marriage. It has offered her the opportunity to continue her charitable spirit which she brought from her native Brazil. As the president of the employees association at Ernst and Young in Sao Paulo, she had organized a book drive to provide reading materials to families who could not afford to buy needed books. The drive was so successful that the company had to convert an office into a storage area for the books. She had organized a similar drive to provide bicycles to children. Every Christmas she adopted a family of indigent children and provided them with a trip to visit Papai Noel and receive toys and much needed clothing. It was this strength and determination that helped us climb Mount Angeles. More importantly, it has provided me with a means to take on new challenges. Now I need only look toward the Olympics to muster the energy to climb the next rock wall.





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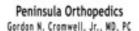




















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Congratulations Fitness Warrior Alicia Cole!!

Article by: Alicia Cole, 2010 Fitness Warrior



As one of the first non-physician warriors, I am honored to be selected. For me the "Fitness" part of the title, translates to movement. As a physical therapist, I have always loved movement. I became a neuro specialist while working at the Rehabilitation

Institute of Chicago during my husband's residency and fellowship. Helping people go from a state of complete immobility to navigating their homes and community was the most rewarding thing I have ever done.

When we moved to Kitsap County, I was thrilled to be a part of the Harrison staff. Working with in-patients, was a bit of a learning curve. I was still in full rehab mode. It took some guidance from my peers, that not EVERYONE was medically stable enough for rehab. Although, I am pretty sure that was how I established my close friendship with Greg Duff. He wants EVERYONE up.

KCMSF has been promoting fitness in an effort to prevent childhood obesity. Eight years ago, I was given the opportunity, to significantly cut my physical therapy hours and return to coaching. (Thank you, honey) I started coaching Track and Field at Fairview Junior high. Track and Field is a no cut sport, open to anyone who has the desire

to TRY. Our coaching philosophy fully supports this:

"Our goal as coaches is to introduce the sport of track and field as well as promote *lifelong interest in running and* fitness. We accept any and all students that are willing to participate in practices to the best of their abilities. We ask them to set aoals at the beainning of the season and work toward those goals every day."

In the last 8 years our program has doubled and currently about 20% of the student body comes out for track. There is strong evidence to support the fact that if children do not find a physical activity that they enjoy by the age of 13, they will be sedentary adults. And object in motion, stays in motionright?

Personally, my movement category is not of "warrior" and more of "groupie". I'll do anything....hiking, tennis, snow skiing, water skiing, volleyball, soccer, etc. as long as there is a group of people involved; even a crazy 24 hour relay race with Glen Christen and company and 60 mile bike rides with Heidi Hutchinson et al. My basic tenant is the more people you can get involved the more fun you are going to have.

I want everyone to be a movement warrior. Set goals. Take on new challenges. Just do it! I just took on a new challenge. I am the new head volleyball coach at Ridgetop Junior High. It's only been 12 years since I've played, how hard could it be when you are passionate about it?

Thanks to all those that have motivated me over the years: Michelle DeNully, Anne Coupe, Glen Christen, Heidi Hutchinson (my dance mom), Stella Cole, Audrey Mi-

lano, Jan Cockreham, Debbie Gillman, Gillian Esser (for turning skiing into a track event) and Kim Duff, my biggest cheerleader. To my family, thank you for all your support and understanding. I love you!



KCMSF HELPS CITIZENS BRAND THEMSELVES AS ATHLETES



Since its inception in 2006, the Tri Turtle Tri triathlon has donated its "partial proceeds" to support the Kitsap County Medical Society Foundation's 'Prevention of Childhood Obesity" campaign. We are proud to have donated \$23,100 to this cause over the past 6 years.

In conjunction with the generous donations of other major sponsors, this money has allowed the Foundation to provide their annual "Fun Run" to the Kitsap community. I believe it is very important to have a free community event that both encourages and celebrates fitness. The mere visibility of this event "plants the seed" of fitness in the minds of Kitsap County parents and their children. For those citizens who actually participate, the importance of making fitness a family focus is "physically" reinforced.

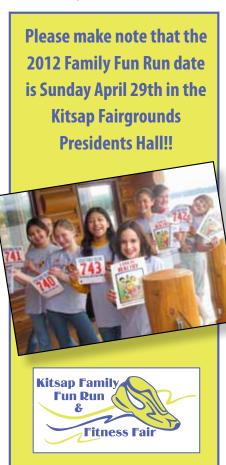
Through my experience training adult women to participate in triathlons, have learned how important it is to create a positive relationship to fitness at an early age. Many of the women I train have been inactive since childhood simply because, at some point, they were deemed "unathletic." It is almost as if an imaginary Dr. Seuss character straight from "The Sneetches and other Tales" arbitrarily refused to brand them with the "star upon thars" that would

allow them to consider themselves as "athletic." Without this initial endorsement from childhood, these women have spent a lifetime considering themselves as unable or unworthy of participating in athletic endeavors. At best it has left them "out of shape" and disconnected from their bodies; at worst, it has left them with health problems that have been caused or exacerbated by their lack of overall fitness. It takes these women a tremendous amount of work and an inspiring amount of courage to overcome a lifetime of exclusion from fitness related activities.

This reality, that I have witnessed since the Kitsap Tri Babes originated in 2003, has reinforced for me how very important it is for young people of all abilities, all shapes, and all sizes to feel included in fitness activities. Tri Turtle Tri is enthusiastic about supporting the Foundation's Fun Run because we believe that is does provide a positive and inclusive opportunity for young people and their families to participate in a fitness endeavor. The Fun Run's inclusive missive helps to positively re-define the definition of "fitness" itself. And, by participating in the event, Fun Run finishers receive something much more important than their tangible finisher's ribbon – they brand themselves with the intangible self definition of "athlete" which, hopefully, will launch them into a lifetime of fitness and well-being.

~ Lisa J. Ballou, M.A. Ph.C.

Family Fun Run!!



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Fire and Ice **Kitsap Fairgrounds Pavilion** October 15, 2011 At: 5:30 PM



New Members Gathering 11.11.11 at 5:30 PM The home of Dr. Glen and Rebecca Carlson



WSMA HOD Meeting Washington State Medical January 23, 2012 8am – 5pm Red Lion Olympia Hotel, Olympia

KCMS Family Holiday Party December 4, 2011 At: 4:00 PM Kitsap Golf and Country Club

Kitsap Fairgrounds Presidents Hall Kitsap Family April 29, 2012 At: Noon Fitness Fair

Spring Installation Dinner Meeting May 10, 2012 At: 5:30 PM Location: TBD

Fun Run



The Communiqué is produced by katcolestudios.com, for the Kitsap County Medical Society and is distributed to all members. Responses, inquires or suggestions for articles may be directed to:

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