

The MedPeds News

The Official Newsletter of the National MedPeds Residents' Association

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Spring 2003

PRESIDENT'S COLUMN

By David C Kaelber, MD, PhD
NMPRA President



Now that recruiting season is over, we can all turn our attention over to other things. NMPRA is moving ahead on several initiatives. First of all, the first edition of the MedPeds Fellowship Guide is out. This Fellowship Guide can be found on-line at http://www.medpeds.org/fellowship_guide.htm. This Guide is a wonderful resource for anyone thinking about MedPeds Fellowships, whether you are not sure if a Fellowship is right for you or you know you want to pursue post-residency training. Almost 20 different types of MedPeds Fellowship options are described.

We are also continuing to enhance our MedPeds job resources. The NMPRA MedPeds Job Opportunities web page continues to list almost 70 MedPeds Jobs, many updated for Spring 2003. The NMPRA MedPeds Job Opportunities web page is the largest listing of MedPeds jobs on the web. Secondly, residents looking for jobs may also find the MedPeds Jobs Pamphlet (http://www.medpeds.org/jobs_guide.htm) useful in explaining to perspective employers what MedPeds is. Finally, a new version of the MedPeds Job Search Guide, put together by the American Academy of Pediatrics Internal Medicine-Pediatrics Section (AAP Med-Peds Section), is on the NMPRA website at http://www.medpeds.org/jobs_guide.htm.

For medical students that you know who want to know more information about MedPeds we have additional resources as well. A new version of the Medical Student Guide to Combined Internal Medicine and Pediatrics Residency Training, put out by the Medicine-Pediatric Program Director's Association (MPPDA), is now on-line at

<http://www.medpeds.org/guide.htm>. We have also updated the MedPeds Residency Program links for all of the Residency Programs in the country (http://www.medpeds.org/program_map.htm). In addition, we have created a new electives web page (<http://www.medpeds.org/electives.htm>) to list opportunities for Medical Students to participate in MedPeds electives.

Finally, think about running for a NMPRA office and applying for a NMPRA Award (worth \$1,000). Please think about how you can continue to support NMPRA in the coming year and how NMPRA can support you. More information about running for office and the NMPRA Awards appear in this issue of *The MedPeds News*.

As always, we are looking for suggestions on how we can improve NMPRA to better meet your needs. Please feel free to email me with any comments, questions, or ideas that you have at president@medpeds.org.

NMPRA ELECTIONS

May 19-30, 2003

(Nominations due by May 16, 2003)

Nominations can be submitted through
<http://www.medpeds.org/elections.htm>

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NMPRA AWARDS

Annie Chang, DO
NMPRA Secretary



NMPRA is now accepting applications for the 2003-2004 NMPRA Awards. Two awards are given annually. Award winners receive \$500 for educational purposes, and a \$500 travel grant to the NMPRA National Meeting held in conjunction with the American Academy of Pediatrics National Conference and Exhibition, in New Orleans, LA, November 1-2, 2003. Each awards honors a resident physician who has made extraordinary and lasting contributions to NMPRA and/or Med-Peds at the local, state, regional or national level.

The Howard Schubiner award recognizes outstanding contributions at the local or state level. The Gary Onady award recognizes outstanding contributions at the regional or national level. Applicants for the awards must be NMPRA members and residents at the time of application, and be able to attend the NMPRA National Meeting. Additional information and award applications can be found on the NMPRA website at <http://www.medpeds.org/awards.htm> and applications are due by Friday, May 30, 2003.

SO, YOU'VE BEEN OFFERED A JOB...NOW WHAT DO YOU DO?

Gerald M. Oginski, Esq.

(This is the first in a two-part series on contract negotiation. Mr. Oginski is an attorney in practice for 14 years, specializing in reviewing and negotiating physician employment contracts. He welcomes and encourages questions and can be contacted in Long Island at 516-487-8207, or by e-mail: g.oginski@gte.net)

The details of any job are specified in the contract. Understanding and agreeing with your job contract is essential for your own and your employer's long-term satisfaction. The contract process involves 5 primary steps: receiving the contract, reviewing the contract, having an attorney review the contract, negotiation, and signing the contract. The first 3 steps are covered in this article and the last 2 steps will be covered in part 2.

1. Receiving a contract. By the time you accept a job offer, you should have discussed some basics with your future employer, such as:
 - Salary (base versus productivity incentives)
 - Bonuses • Conferences • Call Schedule
 - Vacation/Sick time • Hours of employment
 - Partnership potential • Perks

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Is the Volume of Medical Information ~~YOUR~~ Residents Need to Learn Knocking Them off Track?



Save up to 25% off trusted handheld medical references by enrolling your Institution in Skyscape's smarTrain program. Give your residents and students the power of a medical library on their PDAs. Sign up now and save on PDAs too. It's easy to do! Visit us at www.skyscape.com/smartrain or email us at smartrain@skyscape.com.



2. Reviewing the contract.

Read it. You do not have to understand it all, but you must read it. Ask specific questions.

- How many years before I become partner?
- Do I have a buy-in, or a work-in to partner?
- How many years will I be an employee?
- Is there equal call among everyone?
- Am I being hired to fill a position for someone leaving, or is the group expanding?
- Do I have my own office, or a shared office?
- Will I receive incentives for bringing in patients?
- Will I be working on a productivity scale; that is, the more patients I see, the more money I earn?
- Can I see the accounting books and tax returns for the last three years?
- Will I be supplied a cell phone/beeper?
- Will the group pay for a car lease, car insurance, and/or car upkeep/maintenance?
- Will the group pay for my home telephone bill and cell phone bill?
- As an employee, will I be able to declare expenses through the business?
- Will the group help me apply for privileges at the hospitals they work in?
- Do I get days off?
- Does the group have a 401K (retirement) plan, or Keogh plan, or profit sharing plan? (Each of these plans allows you to put money away, pre-tax, into a fund that, hopefully, will grow with leaps and bounds over the years).
- Will the group allow me to moonlight? (Assuming you have enough energy to pick your head up off the pillow after a full day in the office.)
- Will I be able to take time off, and still get paid, to study for my boards?
- **Is there a restrictive covenant?**
A restrictive covenant is a clause in a contract that prohibits you from practicing in a certain vicinity of the practice for a certain amount of time. This is probably the most litigated issue in physician employment contracts. When is a restriction too restrictive? When does a restriction reasonably prevent a physician from earning a living practicing his specialty? The answer

depends on what State you live in, and where within that State you practice. For example, if you work in Chinatown in New York City, and your patient population is primarily Asian, then you'd likely want to stay in that 5-6 block radius that is made up of Chinatown. A restriction of 5 miles would be ridiculous and totally unreasonable.

- Are you restricted for 5 years? 2 years? How many years are you restricted from practicing in the local area where you currently work?
 - Often a group's attorney will try to put in the most unreasonable restrictive covenant. It is your goal to minimize the restriction. I personally use it as a bargaining chip. If I have to give in on this point, I want other concessions as a trade-off.
 - The best option would be not to have a restriction. However, if you practice in most metropolitan areas and surrounding suburbs, you will likely encounter it.



A.  B. 

NMPRA Pins
Pin A: \$5 and Pin B: \$4
Place your order through the NMPRA website at
<http://www.medpeds.org/pins.htm>

- Will I have to pay tail malpractice coverage if I leave the group? This is a very important point, and one that will be very expensive if not addressed properly during negotiation. One client of mine came to me after she was discharged from her pediatric group and was almost in tears because she now was required, according to her contract, to pay very hefty malpractice premiums to cover her tail insurance

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coverage. Unfortunately for her, she never had an attorney review her contract prior to signing.

- Vacations: How much time off? Do I get paid vacations?
 - CME (Continuing Medical Education)/Conferences: Will the group pay for one conference a year in addition to my vacation time?
 - Professional dues, publications, journals: Will the group pay for this even if my journals are sent to my home instead of the office?
 - Will the group pay for Board Examination and licensing fees? Will I have time to study of my Board Examination?
3. Ask general questions.
- Is your employment offer what you want?
 - Is it the right location?
 - Are you comfortable with the people in the group?
 - Have you done your research and homework to learn everything you can about the group members?
 - Are you familiar with the hospital that you intend to work in?
 - What do other members of the medical community think of your group?
 - Are they a "mill" just looking to create volume, or are they a "quality" practice, with good caring physicians?

Practical tip:

Assuming this is your first job offer while you are a resident, you will likely be very excited to grab the offer for fear of losing it, and losing a wonderful starting salary. Certainly the salary will be significantly higher than anything you are earning as a lowly resident. But, sorry to be the voice of reason, you ***must not*** jump the gun and agree to everything that is offered yet. You have got to stop and think. You must discuss the offer with your family/spouse/significant other. Your salary is not the only issue to consider. You can speak to other residents in your specialty to learn the average starting salary for residents just going out into practice.

NEXT ISSUE: How to negotiate a contract.

Why NMPRA? Why now?

David Kendrick, MD
President-Elect



NMPRA has grown by leaps and bounds over the last 12 months, and we have the current president and officers to thank. They have done a remarkable job, organizing, planning, creating, focusing and re-focusing the organization into one that truly represents all MedPeds house officers. If you have not yet visited the NMPRA web site (<http://www.medpeds.org>), you should review all of the services and information available to you as a member.

If you are like me, your mailbox and email inbox are constantly bombarded with information from organizations that want you to join. You are probably not even aware of all of the organizations that call you a member, and keeping up with all of the separate Medicine and Pediatric organizations has got your head spinning. What organization then, could possibly rise above the fray to become the one you get active in? Which organization will you identify most closely with?

NMPRA is the only organization that is 100% comprised of your peers in MedPeds. NMPRA was founded by MedPeds residents and it is MedPeds residents that continue to drive the organization. The issues we pursue and the services we provide are chosen by MedPeds residents. In short, NMPRA is the organization that best represents my needs and goals—and I think you will find it very relevant to your life and career as well.

Now is the time to get involved—and NMPRA has lots of opportunities for MedPeds residents at all levels of training.

There are a number of ways to get involved in NMPRA such as working on special projects, serving as a Program Representative, or serving as an elected officer. Important special projects for the coming year include work on the NMPRA web site (programming expertise not required), planning for the Annual NMPRA meeting in New Orleans next fall, editing the NMPRA newsletter, administrating the NMPRA email listserve, serving

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awards committees, and many more. A list of opportunities is on the NMPRA website at <http://www.medpeds.org/opportunities.htm>.

Each MedPeds residency program with NMPRA members has a NMPRA Program Representative. Program Representatives are very important because they provide a vital communication link between their program and NMPRA, as well as serving on various NMPRA committees. As NMPRA continues to grow, and the services provided continue to expand, the Program Representatives will play an increasingly important role.

NMPRA officers set the agenda for the organization. Comprised of the president, secretary, treasurer, and president-elect, the officers serve as coordinators for the various services and activities of NMPRA. They work closely with the NMPRA advisory board, which is made up of practicing MedPeds physicians, as well as the NMPRA Coordinator, who provides clerical and administrative support.

Now is the perfect time to get involved in NMPRA. As the incoming president for 2003-2004, I am actively seeking MedPeds residents who are interested in improving NMPRA and our specialty. Please let us know at president@medpeds.org if you are interested in any of the projects or positions described above. For a complete list of ongoing projects and publications of NMPRA, see the NMPRA web site.

This has been a great year for NMPRA, and with your help and involvement, we can continue to grow and provide even more services and advocacy for MedPeds residents and practicing physicians. I am looking forward to hearing from you!

NMPRA Awards
\$500 Educational Grant
\$500 Travel Grant to attend the
2003 NMPRA National Meeting
New Orleans, LA
November 1-2, 2003
Apply online at
<http://www.medpeds.org/awards.htm>

HANDHELD COMPUTERS ... AN INTEGRAL PART OF THE FUTURE OF MEDICINE PART 2- THE SOFTWARE

Brian Zimmerman, MD

In the last newsletter we talked about a few of the different handheld computers that are available and some of the features that should be considered when purchasing a device. Once you purchase one...what next? This second installment discusses some of the great software that is available to help make your life easier as well as a glimpse of the future of handheld computing.

Once you get a handheld computer, you should spend a little time learning how to make the most out of your address book, calendar, notepad and other built-in functions. There are some great sites out there that are full of "Tips and Tricks" to help you become a whiz with the basics. You can find one of these for the Palm OS at... <http://electronics.cnet.com/electronics/0-3622-8-3173398-1.html>

General Software- One of the first programs that can make life a little easier for Palm users is one called Launcher III. It's a nice graphical way to organize all the program icons on your device. It used to be free and if you can find someone that has the old version on their device they can beam it to you for free. The new version is called Launcher X and costs \$19.99 (www.launcherx.com). Another neat software program for Palm is called WordComplete. It greatly speeds up the entry of text by offering you likely word options for you to choose from after you have written only a couple letters in a word. This function is available standard on the PocketPC devices but not on most of the Palm ones. It can be found at https://secure.cic.com/product_details/wordcomp_details.asp.

Medical Software- There are several companies producing medical texts for handheld computers. Each different company requires you to load their own "reader" software to allow you to view their texts. The two most popular ones out there now are HandHeldMed (<http://www.handheldmed.com>) and Skyscape

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(<http://www.skyscape.com>). Both of these companies offer a large variety of texts for sale that can be used on both the Palm and PocketPC devices. Both offer several texts in the 5 Minute Clinical Consult series which is a good place to start if you have not yet tried a medical text.

There are also several antibiotic guides now available for handheld computers. Two of the most popular are the Sanford Guide (<http://www.sanfordguide.com> for \$25) and Johns Hopkins Antibiotic Guide (<http://www.hopkins-abxguide.org> for FREE). These guides can provide you with quick access to authoritative antibiotic and pathogen information that can be of great help in patient care.

Drug references have also been very popular software for handheld computers. Two of the most popular are ePocrates (<http://www.epocrates.com>) and the Tarascon Pharmacopea (http://www.usbmis-test.com/beta/beta_test.php). Both still have free version but will probably soon have fees associated with them. They are a real nice addition to your handheld and can provide great information on dosing, cost, drug interactions and more. If you do not yet have a drug reference on your device you may want to try out one of these.

Check out the NMPRA website:

<http://www.medpeds.org>

Another category of medical software includes a growing number of programs that aid in calculating most of the common medical formulas (after you have memorized them...of course). These can really be a time saver and help in reducing some medical errors. The two most popular ones for the Palm OS are MedMath (<http://mail.med.upenn.edu/~pcheng/medmath>) and MedCalc (<http://medcalc.med-ia.net>). One of the best ones for PocketPC is Archimedes it can be found at (<http://www.skyscape.com>). There are a whole host of other cool medical calculators out there including ones for evidence based medicine calculations. You can find links to these and a whole lot of other great software for handheld computers at <http://wsuim.org/PDA>.

The Future?- And now, a few words about the future of handheld computers. Several handhelds

are already available with a built in cellular phone that will allow you to connect to the internet anywhere that a cell phone can reach. Some hospitals are also establishing wireless connections to their network. With a special card inserted into your handheld, you can have complete access to the whole hospital information system. Our local hospital recently tried two of these systems and they are truly amazing. One of these systems can even notify you on your handheld computer if a critical lab is returned on one of your patients.

Handheld computers are still relatively new to the medical field, but with the right device and the right software, they can have a great impact on how we practice medicine!

NMPRA ELECTIONS

Annie Chang, DO
NMPRA Secretary



It is that time again—NMPRA Elections!!! NMPRA has had a very productive year in terms of initiating and completing projects to help all MedPeds residents. This was due to the hard work of the 2002-03 NMPRA officers and Program Representatives. Our current President, David Kaelber, MD, PhD has worked very hard this year to bring forth many new resources and has collaborated extensively with both the Medicine-Pediatrics Program Director's Association (MPPDA) and the American Academy of Pediatrics Med-Peds Section to recognize the needs of MedPeds residents. The four resident officers that comprise the current NMPRA Executive Board are: President-David Kaelber, MD, PhD of Case Western Reserve University, President-Elect-David Kendrick, MD of Tulane University, Secretary-Annie Chang, DO of Texas A&M University, and Treasurer-Emery Chang, MD of Tulane University. We are accepting nominations for the offices of President-Elect, Secretary, and Treasurer for the 2003-04 academic year. There will also be two at-large representatives that will be selected in the summer of 2003 by the new Executive Board. Nominations can be submitted by e-mail at president@medpeds.org until "riday, May 16, 2003. Addition election details and the nomination forms can be found on-line at <http://www.medpeds.org/elections.htm>.

**We are not alone. . .
North East MedPeds Meeting
brings together trainees,
practitioners for a weekend
conference**

New Haven, CT

*David Kendrick, MD
President-Elect*



Networking, education, and fun were all on the agenda at this year's North East MedPeds Meeting in New Haven, Connecticut. Hosted by the Yale MedPeds program, the meeting had something for everyone. Meeting attendees represented a broad cross-section of the northeastern MedPeds community, including residents, medical students, faculty, and even community MedPeds physicians practicing in a variety of environments. Residents and medical students had the opportunity to meet and interact with MedPeds physicians currently in practice, affording them a view of "the light at the end of the tunnel."

Three residents chaired the event, Dr. Fatima Khan (PGY4), Dr. Megumi Okumura (PGY3), and Dr. Monique Tello (PGY2) with Dr. Caroline Kim, MedPeds faculty at Yale helping to coordinate the event as well. Meeting attendees included residents, students, and faculty from several programs, including: Bridgeport, Cedars-Sinai, Christiana Care, Harvard, Mt. Sinai, Rochester, and Yale. Presentations and discussions were held on a number of topics of interest to residents, including the job search, preparing for two board exams, and fellowship opportunities.

Dr. Brian Kahn, Program Director at Cedars-Sinai, California, gave a "state of the specialty" address in which he concluded that despite the slump in primary care numbers of late, MedPeds continues to be a vibrant, growing sector of the primary care community.

Dr. Samuel Seward, program director at Mt. Sinai in New York City related his experiences in creating and managing a continuity clinic for chronic diseases. Staffed by MedPeds physicians, this clinic provides a unique group of patients with the kind of continuity of care that only a MedPeds physician can offer. Dr. Seward stressed the importance of providing a formal transition to

adult care for these chronic patients, even though the parties involved in the patient's care may remain the same.

A panel discussion on "Life after residency" offered residents and students the opportunity to ask questions of MedPeds physicians practicing in a variety of clinical settings, including a community-based clinic, academic medicine, private practice, combined specialty practice, and even emergency medicine.

Dr. Tommy Cross, who is quadruple-boarded (Medicine, Pediatrics, Adult Infectious Diseases, Peds Infectious Diseases), and is the VP of Education for MedStudy and the NMPRA Non-Resident Advisor, hosted a discussion on fellowship training as well as presenting a workshop on surviving two board exams. Dr. Cross provided copies of the NMPRA MedPeds Fellowship guide, a document that he helped to author, to all in attendance.

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The MedPeds News
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***(The views expressed in this newsletter
are those of the authors and not
necessarily those of NMPRA.)***

***(If you have ideas for articles or would
like to contribute to The MedPeds News
please email nmpra@medpeds.org.)***

I was lucky enough to represent NMPRA at this wonderful meeting, and was invited to speak during a break to introduce NMPRA and invite everyone to a NMPRA presentation at the end of the day. The turnout at the presentation was excellent, and interest in participating in NMPRA seemed quite high. We discussed the purposes of the organization, as well as ways that all residents can get involved. There were several interesting questions raised, including one about whether NMPRA represents MedPeds fellows as well. As far as I know, this was the first time that the

question had been raised, but I felt sure that NMPRA could accommodate fellows as well. However, expect to see the issue raised on the NMPRA list-server soon.

This meeting was quite remarkable, bringing together members of a community who all too often seem scattered by the sheer variety of occupations they hold. The opportunity to interact and share ideas, to get valuable career advice and instruction, and to make contact with "others like ourselves" were all positives cited about the event.



Participants in the North East MedPeds Conference

Check out the NMPRA website:

<http://www.medpeds.org/>