

# NEW HAMPSHIRE **PHYSICIAN**

A PUBLICATION OF THE NEW HAMPSHIRE MEDICAL SOCIETY

## Registration Open for Trending Topics in Medicine 2020 Nov. 13–15







# ADJUSTING TO THE NEW NORMAL?

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## Also in this issue...

Health Equity “How-to” – Start with a First Step

What I Have Learned From My Most Unhappy Patients

Healthy Voting during the Pandemic



### New Hampshire Medical Society

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\*Opinions expressed by authors may not always reflect official NH Medical Society positions. The Society reserves the right to edit contributed articles based on length and/or appropriateness of subject matter. Please send correspondence to “Newsletter Editor,” 7 N. State St., Concord, NH 03301.

#### Do you or a colleague need help?

The New Hampshire Professionals' Health Program (NH PHP) is here to help!

The NH PHP is a confidential resource that assists with identification, intervention, referral and case management of NH physicians, physician assistants, dentists, pharmacists, nursing licensees, veterinarians, chiropractors, dietitians, licensed drug and alcohol counselors, mental health practitioners, midwives, optometrists, podiatrists and psychologists who may be at risk for or affected by substance use disorders, behavioral/mental health conditions or other issues impacting their health and well-being. NH PHP provides recovery documentation, education, support and advocacy – from evaluation through treatment and recovery.

For a confidential consultation, please call Dr. Sally Garhart @ (603) 491-5036 or email [sgarhart@nhphp.org](mailto:sgarhart@nhphp.org).

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John Klunk, MD  
NHMS President

*Please consider  
joining us for  
this weekend of  
education and  
fun...*

## President's Perspective

### The 2020 NHMS Annual Scientific Conference

The 2020 NHMS Annual Scientific Conference will take place at the beautiful and historic Wentworth by the Sea, in New Castle, New Hampshire, from Friday to Sunday, November 13-15, 2020. We have worked closely with the Wentworth to assure that in-person attendees have every safety measure in place as recommended by the CDC and NH DHHS including masking, physical distancing, limited numbers of attendees in a given space at a given time, and other measures. In addition, for the first time this year we will be offering a virtual option, for the full curriculum as well as certain portions or even individual talks that can be accessed remotely for your comfort and safety.

Scientific presentations will focus on timely and current issues including the social determinants of health, the novel coronavirus SARS-CoV2 and COVID 19, and equity issues in health care. We will again be offering three hours of CME on pain management and addiction disorder on Sunday morning, satisfying the NH Board of Medicine's requirements for all New Hampshire physicians in this area.

As we reach a new normal in the COVID-19 pandemic, and many of us start to come out of crisis mode, we are remembering that our patients need us to continue to focus on much more than just COVID-19 to support and improve their overall health. Please consider joining us for this weekend of education and fun, whether in the magnificent setting of the Wentworth by the Sea in New Castle, or virtually from wherever you happen to be. Either way, I hope to see you there. ■

NHMS20 is an incredible deal! Early bird rate for members is \$199 for 14 Category 1 CME credit hours. **That's less than \$15 per CME credit hour and satisfies your opioid prescribing competency requirement!**

The CME package is available for both in-person and remote purchasers **-online for 45 days after the conference through our new online learning management system.** Pay now for less than \$15 per CME credit hour, view remotely and/or complete at your leisure before December 31st.



NHMS Presidents past and present enjoy NHMS19

# Trending Topics in Medicine 2020

*In this rapidly changing environment we will do our best to bring you a safe and high quality program. Adjustments to the program will be made as necessary.*

## Friday, November 13

Noon NHMS Council meeting

1:30 – 5:00 pm **Population Health**

Trinidad Tellez, MD – Diversity  
Marie Ramas, MD – Health Equity  
Kelly Laflamme – Elder Services  
Sally Kraft – Healthy Aging  
Betsy Rhynehart – Using Community Data  
William Kassler, MD, MPH

5:30 pm Reception

6:30 pm Dinner

## Saturday, November 14

6:30 am **Bowler-Bartlett Fun Run/Walk** (free T)

8:30 am **The Impact of Child Abuse**  
Gwendolyn Gladstone, MD

9:30 am **Family Adventure**

9:30 am **Trauma Informed Care**  
Speaker TBD

11:15 am **Body Dysmorphic Disorder**  
Mark Constantian, MD

12:15 pm Lunch **NHMS General Session**  
Current Public Health Issues  
John Klunk, MD, NHMS President  
50-year member recognition

1:45 pm **Safe Care for Children**  
Lucy Hodder Esq.

## Saturday, November 14 CONTINUED

2:45 pm **When You Get THE Letter from the Board of Medicine – the do's and don'ts**

James Noble, MD  
Victoria Barnard, Investigator

4:15 pm **Leadership in a Crisis**  
Speaker TBD

6:00 pm President's Reception

7:00 pm President's Inaugural Dinner – Passing of the Presidential Medallion from John Klunk, MD, to George Kenton Allen, MD

## Sunday, November 15

These 3 credits are compliant with New Hampshire RSA 318-B:40 – opioid education requirement.

8:00 am **Mothers with Substance Use Disorder**  
Steven Chapman, MD

9:00 am **Using Drug Testing in Clinical Care: Why, when and what next**  
Molly Rossignol, DO

10:00 am **Thoughts, Feelings and Getting High: CBT and Opiate Use**  
Michael Kisicki, MD

11:00 am **Program Ends**

The CME package is available for both in-person and remote purchasers – online for 45 days after the conference through our new online learning management system. Pay now for less than \$15 per CME credit hour, view remotely and/or complete at your leisure before December 31st.

The Maine Medical Education Trust designates this live activity for a maximum of 14 Hours of AMA PRA Category 1 Credit™.

The Maine Medical Education Trust is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.



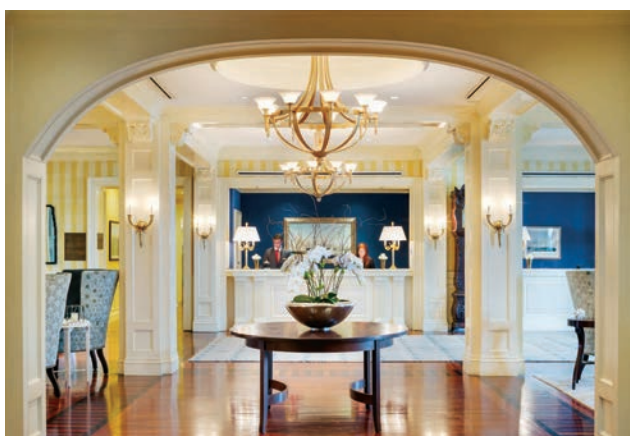


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**\*Cancellations must be received three days prior to  
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# Register Now at <http://nhms.org/2020conference!>

Or, if you prefer a paper option please complete this form and return to:  
NHMS, 7 North State St., Concord, NH 03301

Name \_\_\_\_\_

Spouse/Guest \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

I will attend:      In person (Sat. lunch included) ☐      Remotely ☐

## Early bird (postmarked before Sept. 15):

All 3 Days: **NHMS Member**      \$199 ☐

**Nonmember**      \$299 ☐

**Allied Health Professional**      \$229 ☐

That's less than \$15  
per CME credit hour  
and satisfies the pain  
management CME  
requirement!"

## After Sept. 14:

All 3 Days: **NHMS Member**      \$269 ☐

**Nonmember**      \$359 ☐

**Allied Health Professional**      \$269 ☐

**Meals:** Due to social distancing guidelines, seating for lunch is limited to CME registrants only. Boxed lunches for guests may be purchased and taken to a location of one's choice.

Saturday boxed lunch for guest      \$40 ☐      # of guests \_\_\_\_\_

Friday night dinner      \$100 ☐      # of guests \_\_\_\_\_

Saturday inaugural dinner      \$100 ☐      # of guests \_\_\_\_\_

Total Due: \_\_\_\_\_ (Please make check payable to NH Medical Society.)

Saturday AM Family Activity – FREE      \_\_\_\_\_ # of Adults      \_\_\_\_\_ # of children

Ages of children \_\_\_\_\_

No refunds after 10/30. Refunds before 10/30 subject to \$30 processing fee.

Need any special accommodation? Please call 603.224.1909 or NH Toll Free 800.564.1909

If special arrangements are required for an individual with a disability, please contact [Joy.Potter@nhms.org](mailto:Joy.Potter@nhms.org).



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## For Your Protection

### At the hotel:

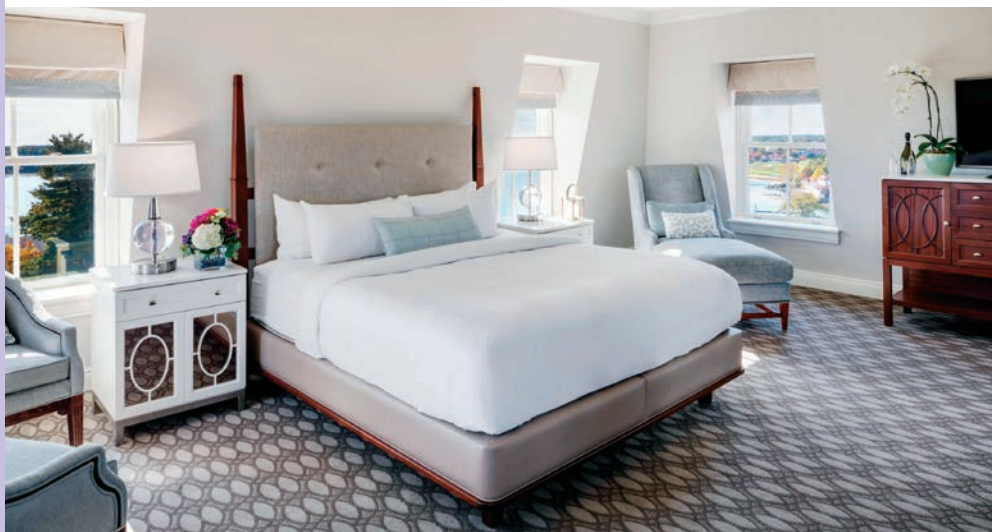
- All hotel staff are temperature checked when they arrive at work.
- There are no valets. You are responsible for transporting your own luggage.
- Rooms are fully sanitized with spray cleaners.
- Remote check-in is available.
- After you check-in, no one will enter your room. If you need new towels or other supplies they will be left at your door.
- As of this printing, the indoor pool is closed.
- The Spa at the Wentworth has limited service.
- Watch for guidance markings for social distancing and flow.
- Face coverings are required in all indoor public areas.

### Meals:

- Seating for Saturday lunch is limited to CME registrants. Pre-purchased boxed lunches for guests may be taken to a location of one's choice.
- Dinner reservations will be limited because of social distancing.
- Meals will be served by hotel staff.
- The hotel restaurant is open at state limitations (50% at time of printing).

### The Conference:

- Live participants will still need to sign in.
- Registration will be revised to alleviate lines forming.
- Social distancing means limited seating with a possible overflow room.
- We are brainstorming a creative way to have a "social hour".
- In-person and remote purchasers will have access to the conference online for 45 days through our new online learning management system. Register at the early bird price and then view or complete at your leisure before December 31st. ■





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Trinidad Tellez, MD  
Director, Office of Health  
Equity, NH DHHS

*Health equity  
means that  
everyone has  
a fair and just  
opportunity to  
be as healthy  
as possible.*

## Health Equity “How-to” – Start with a First Step

We chose to become physicians because we want to help people. We get up every day and aim to do the best we can for each and every individual patient we see. And yet, there is consistent evidence that we – collectively as healthcare providers working in the healthcare system – do not treat everyone the same. Or, even if we are sure we treat everyone the same, there is consistent evidence that different people/patients experience the healthcare system very differently.

*Health equity means that everyone has a fair and just opportunity to be as healthy as possible.*<sup>1</sup> How do we work towards this as individuals, within our organizations, and at the system level?

As clinicians we are first individuals, in doctor-patient relationships and entrusted with our patients’ care and well-being. Day in and day out, we navigate encounters with people who we may, or may not, recognize as being different from ourselves. And yet, every interaction with another human being is a cross-cultural interaction, because we are all – each of us – comprised of many intersectional dimensions of identity: artist, fisherman, sibling, gay, parent, biker, introvert, baker, immigrant, caretaker, educator, runner – most of which are not visible to others. We’ve heard about implicit bias – what does that mean? We may fail to disclose all the options available to one patient, or decide that another patient can’t afford the medication we might prefer to prescribe, or fail to take seriously a patient’s account of her symptoms – usually without any conscious awareness of our actions. How do we improve our own capacity to be aware of our own biases to assure we have positive, productive, respectful encounters with our patients, and all the other people we interact with? Implicit bias is a normal part of being human, so let’s begin by taking the Implicit Association Test and learning more about our own unconscious biases, at <https://implicit.harvard.edu/implicit/>.





We practice within healthcare settings or organizations, comprised of multiple people. How do we assure the systems and processes in place assure that every patient gets the highest quality care and services no matter what dimension of diversity they represent? Organizations strive to ensure everyone has equal opportunity to thrive by providing high quality services that are accessible to all in New Hampshire – yet achieving this can be challenging. Many of us have simply not had access to an effective approach that would turn our goals into broader success. Are you interested to learn about a roadmap that enables, cultivates, and supports the delivery of high-quality services for all people, called the Culturally Effective Organizations Framework? Attend the Friday, November 13, afternoon sessions on public health at the NHMS Annual Scientific Conference – Trending Topics in Medicine 2020. (You can register at <http://www.nhms.org/2020conference>.)

In addition, our organizations combine to make up systems. How do we assure that collectively we are working to create opportunities for people and populations who have historically borne the disproportionate impacts of inequities in the social determinants of health, resulting in worse health and health outcomes. Read the *Initial Report and Recommendations of the Governor's COVID-19 Equity Task Force* found at <https://www.governor.nh.gov/sites/g/files/ehbemt336/files/documents/equity-response-team.pdf>

We have many opportunities to take a small first step. And then the second step can follow, ... as we all journey collectively on the path to equity! ■

<sup>1</sup> Braveman, P., Arkin, E., Orleans, T., Proctor, D., and Plough, A. *What Is Health Equity? And What Difference Does a Definition Make?* Princeton, NJ: Robert Wood Johnson Foundation, 2017. <https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity.html>



# URGENT RESOURCES FOR URGENT TIMES.

## INTRODUCING THE COVID-19 RESOURCE CENTER.

You can access Coverys' industry-leading Risk Management & Patient Safety services, videos, and staff training at [coverys.com](https://coverys.com).

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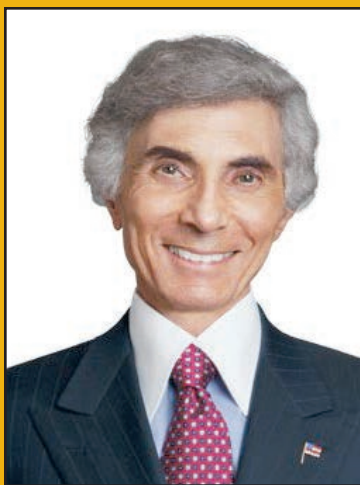
## NHMS Welcomes New Members

Eric D. Adams, MD  
David R. Brown  
Suzanne Coble, MD  
Mary M. Cullen, DO  
Irena R. Danys, MD  
Erica J. Fasano, MD  
Anping Han, MD  
Patrick A. Ho  
Angel K. Honor, MD  
Cynthia L. Jenson, MD  
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Brian G. Sweeney, DO, FACEP  
Richard F. Tedesco, MD  
Sean Bradbury White, MD

## NHMS CORPORATE AFFILIATE PROGRAM SERVICES

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Practice Management  
Telecommunications  
Uniforms, Apparel & Linens  
Web-based Billing

NHMS CAP is a paid membership program whose members meet criteria as posted at [www.nhms.org](http://www.nhms.org)



Mark B. Constantian, MD,  
FACS

*Our patients  
were not the  
depressed  
or delusional  
patients  
seen by  
mental health  
professionals...*

# What I Have Learned From My Most Unhappy Patients

In the mid-1980's, as a young plastic surgeon not yet 10 years in practice, I performed reconstructive nasal surgery on three patients who had good surgical outcomes but extremely stormy postoperative courses. All became recluses. One gave up her university professorship. One became unable to care for her family. One tried to amputate his nose.

At the time, I had heard only a little about body dysmorphic disorder (BDD), but these disturbing events drove me to learn more. An affliction that was not contagious or life-threatening nevertheless disrupted patient and family happiness, altered patients' life trajectories and productivity, and in the worst cases ended in suicide. Its apparent cause was a sudden and inexplicable obsession with some physical feature usually beginning in the teen years.

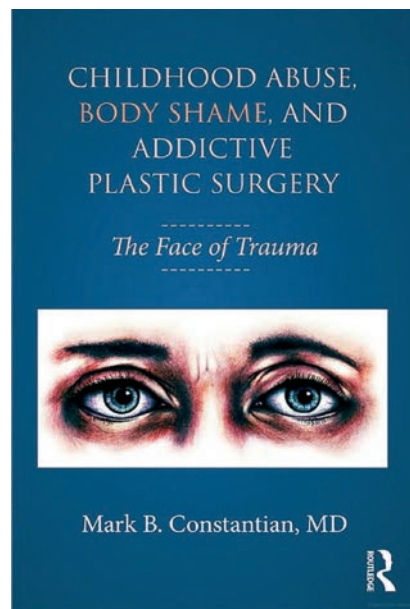
From the plastic surgeon's perspective, there were still gaps. Our patients were not the depressed or delusional patients seen by mental health professionals: they were high-performing individuals requesting surgery, or more surgery. But even when the surgical results accomplished the patients' goals, they were often dissatisfied; many hated themselves or hated their surgeons. These are the strange celebrities with distorted faces profiled in the media and others ridiculed by those who don't understand what they are seeing.

There was another missing piece: What caused body dysmorphic disorder? For a problem so common and devastating, with so many florid, uniting clinical features, why wasn't the cause more obvious? I went to the literature and began my own clinical research.

Several months ago Dr. John Klunk called our attention to the Adverse Childhood Experiences Study, which showed that, even in a non-disadvantaged general medical population, the prevalence of at least one type of childhood abuse or neglect was unexpectedly high—64%. In my own patients, overall prevalence is 79%, and 85% in those who have had multiple cosmetic surgeries. The study of childhood trauma and its effects became the key to understanding my patients and others like them who struggle with different addictions or self-harming behaviors.

This is not a lecture solely about plastic surgery, or about BDD as seen by plastic surgeons. Whatever type of medicine you practice, you will see the effects of childhood abuse or neglect. ■

*Dr. Constantian will be speaking at this year's NHMS Annual Scientific Conference, Nov. 13-15. You can register at <http://www.nhms.org/2020conference>. The CME package is available for both in-person and remote purchasers -online for 45 days after the conference through our new online learning management system. Pay now for less than \$15 per CME credit hour, view remotely and/or complete at your leisure before December 31st.*





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of care you  
provide for  
your patients'  
physical well-  
being?*

## Accessing the Advice You Need

With the ever-increasing complexity of the financial world, it has never been more vital to have access to reliable financial advice. The challenge which many physicians face is gaining an understanding as to how financial professionals are allowed to provide advice. These various relationships can be characterized by one of three service models.

- 1) Financial Product Solutions You are acquiring various insurance products, variable annuities or investments – purchased through a Brokerage Account. In this model the financial professional will be acting in their capacity as an **Insurance Agent** or **Registered Representative** and their compensation is provided in the form of commissions received from the product sponsor. The advice provided is limited to advice specific to the product or investment being purchased.
- 2) Asset Management Involves providing you with investment advice specific to the assets under the Financial Advisor's management. Quarterly or annual reviews are required. You will pay a fee; traditionally it is a percentage of assets being managed. The paying of a fee for advice establishes a relationship between you, the **Financial Advisor** and the institution responsible for supervising your advisor.
- 3) Financial Planning Distinct from the first two models in that, while in the first two relationships the advice provided is limited to the specific products being acquired or assets being managed, with Financial Planning, the advice provided is intended to cover all aspects of your financial life. With this model, you pay a fee to a **Financial Planner** to access Education, Analytics, Data Collection and Evaluation and Financial Modeling, designed to position you to make informed decisions in all areas of your financial life. The planning fee is based on the level of complexity of your situation and the range of services you choose to access. Here again, the fee establishes a relationship. It should be





noted that any insurance products and/or investment services acquired as a result of plan implementation are acquired outside of the financial planning relationship and are covered under one of the prior two service models.

Each model for receiving “Financial Advice” has its place in helping you create a financial infrastructure to support the realization of the future you hope for. The seriousness of this important endeavor calls for more than simply finding a competent “vendor of service.” Rather, it calls for finding an “Ally”, someone who is trustworthy, like-minded and able to provide you access to the talent and resources you need to create and maintain your fiscal well-being.

Unfortunately, the third option only tends to be sought out by physicians when their situation becomes too complex for them to feel comfortable managing themselves, causing a sense of urgency to bring order to the chaos; or if they face an overwhelming problem which needs professional expertise to address properly.

The time-honored adage in medicine is also true in financial planning. “An ounce of prevention is worth a pound of cure.” Just as when maintaining your *physical* well-being there are benefits for being proactive, rather than reactive, so it is true regarding your *fiscal* well-being. Why not decide to treat your family’s fiscal well-being with the same standard of care you provide for your patients’ physical well-being? ■

*Benjamin Mitchell is a registered representative of and offers securities, investment advisory and financial planning services through MML Investors Services, LLC. Member SIPC. OSJ:200 Clarendon Street, 19th & 25th Floors. Boston, MA 02116. 617-585-4500. CRN202203-262316*



## WANTED

Internal Medicine, Orthopedic, Neurologic, General or Family Practice Physicians interested in providing part-time or full-time staff medical consultant services for the Social Security Disability program, through the state Disability Determination Services office in Concord NH. Staff work involves reviewing disability claims on-site and requires no patient contact. SSA Training is provided.

### OR

Physicians interested in performing consultative examinations in their office for the Social Security Disability program, through the state Disability Determination Services office. Compensation is provided per exam. All administrative aspects are performed by the DDS and no billing is required. Free dictation service and a secure web portal is provided for report submission.

Any interested physician must be licensed by the state of NH and in good standing. Please email inquiries to [Anne.Prehemo@ssa.gov](mailto:Anne.Prehemo@ssa.gov)

## Fiscal Fitness for YOUR Life

# IS IT TIME FOR YOUR ~~PHYSICAL~~ <sup>Fiscal</sup> CHECK UP?

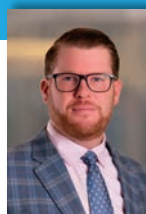
Baystate Financial, the preferred financial education and planning service provider for the New Hampshire Medical Society.



## Your FISCAL FITNESS Team

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Watch for us in the **WEEKLY PULSE** communication featuring timely info from the Baystate Corner.

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**To: All Physicians with New Hampshire Licenses Expiring June 30, 2021**

**Subject: Move to Online CME Reporting for NH Re-Licensure & \$100 Fine for Incomplete or Late Filing of CME Reports**

**It is almost time to report your 2019-2020 Continuing Medical Education (CME) credits.**

**NEW** This year there will be an online reporting system in place for reporting your CMEs. That system is being finalized now, so please look for detailed instructions in December on how to report your CME credits and upload certificates. You will not be receiving the traditional paper CME reporting form.

As a condition of re-licensure, **ALL physicians must report biennially** the type and amount of CME credits obtained within the **two calendar-year (January-December)** cycle.

1. The two-year credit hour requirement is **100 hours**, with a minimum of 40 hours in Category 1 and a maximum of 60 hours in Category 2.
2. **Physicians who maintain a DEA license** linked to a NH address (pursuant to RSA: 318-B:40) **are required to include 3 Category 1 CME credits** related to pain management and/or opioid use disorders as part of the 100 credits.
3. All credits **must be obtained** within your cycle of **January 1, 2019 – December 31, 2020**, and reported online to the NH Medical Society no later than **February 28, 2021**.
4. **NEW** This year the Board of Medicine is instituting a \$100 late fee for CME reporting. Unless excused by the board for good cause shown, **a late fee of \$100 will be applied if a physician fails to complete the 100 credits within their two-year cycle or fails to report those credits prior to the February 28th reporting deadline.**

Please know that New Hampshire has not instituted a CME waiver in regards to the pandemic. Therefore, here's your check list for reporting the required re-licensure CMEs:

- **100 CME credits** earned between **January 1, 2019 and December 31, 2020**
- **3 CME credits** related to pain management/opioid use disorder (if you hold a NH-DEA license)
- **Digital copies** of official certificates or transcripts documenting Category 1 hours earned
- **\$40 processing fee**
- **Filed online no later than February 28, 2021**

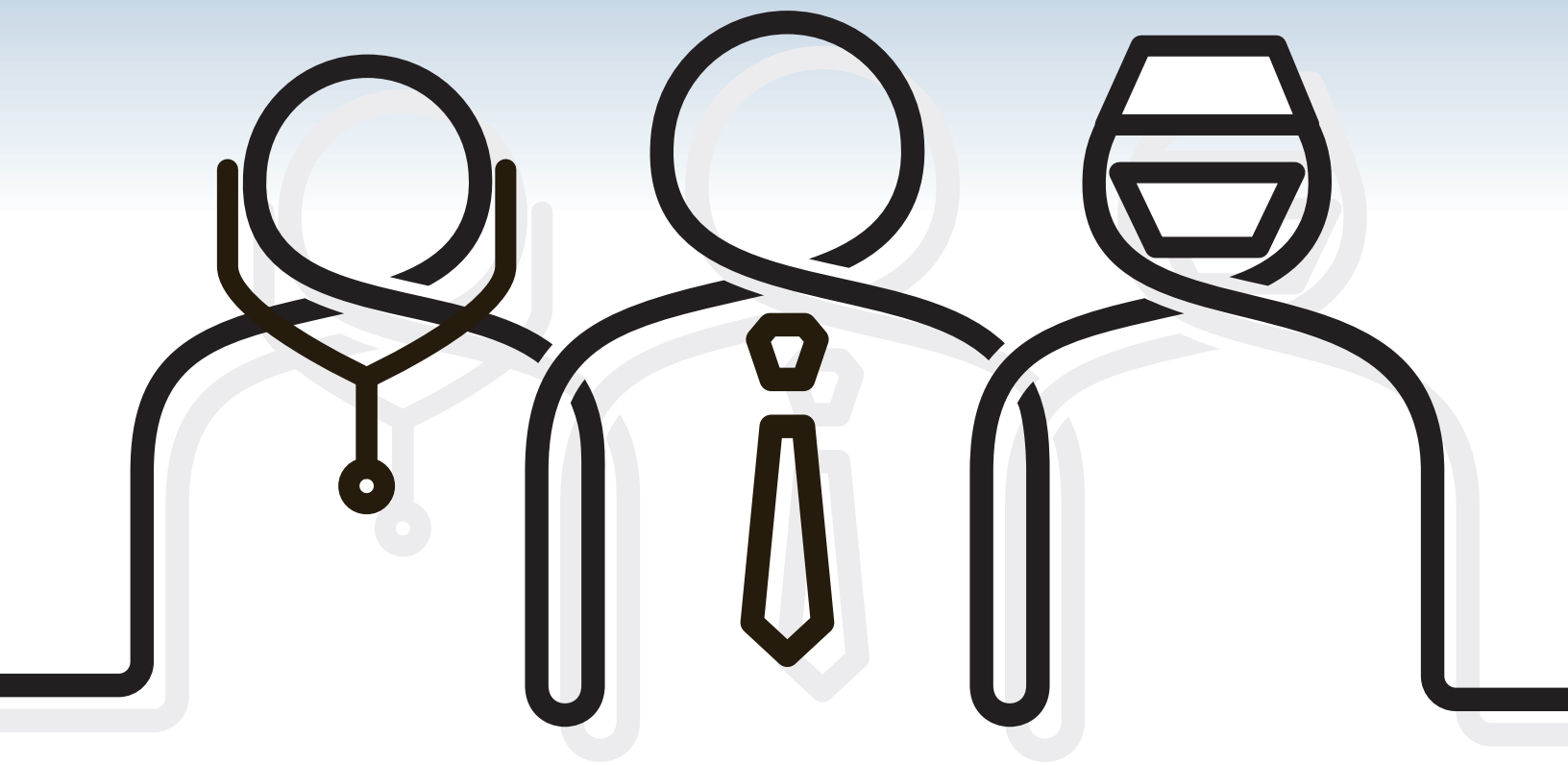
Your prompt attention in completing your CME requirement will aid in a timely renewal of your license.

To avoid unnecessary mailings, if you do not wish to maintain your NH medical license, please advise this office as soon as possible.

**Questions? [mary.west@nhms.org](mailto:mary.west@nhms.org)**



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**Dr. Tom Sherman**  
NH State Senator – District 24  
Gastroenterologist –  
Core Physicians

*Members' Corner includes selections focusing on personal and professional issues impacting doctors in New Hampshire – a forum for sharing the “voices” of NHMS members. We also encourage “Letters to the Editor,” responding to articles published in prior editions. Please submit articles for our Members' Corner to [james.potter@nhms.org](mailto:james.potter@nhms.org)*

## Members' Corner

### Healthy Voting during the Pandemic

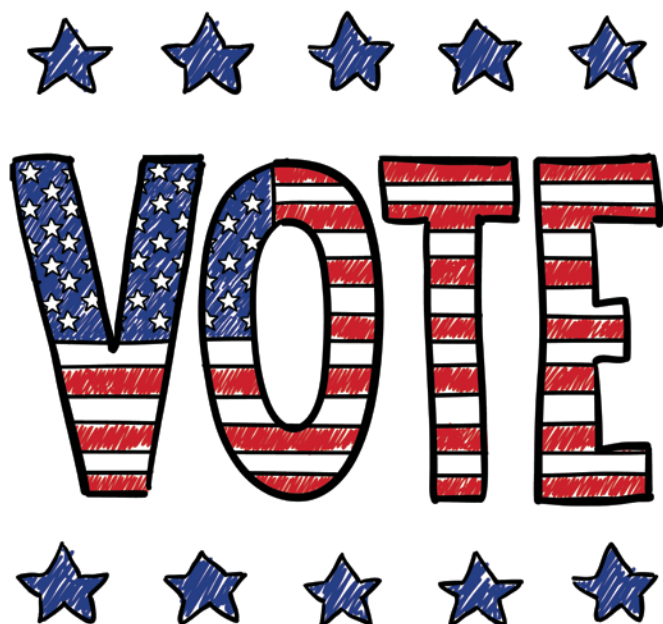
As a physician serving in New Hampshire's State Senate and a former member of the New Hampshire House of Representatives, it has been my honor to advocate for our state's public health and organized medicine during my time in office. This year, we are faced with a strange enemy in the COVID-19 pandemic. I want to send a heartfelt thank you to everyone fighting on the front lines. New Hampshire has asked a great deal from you, and I thank you for that sacrifice. Over the past few months, I've worked with my Senate colleagues to pass a series of legislative packages to help combat the pandemic, such as putting into statute advances in telehealth, reducing prior authorizations, reviewing safety and COVID-related experiences of our nursing homes, and facilitating absentee voting in the 2020 elections. As September's Primary election and November's General election approach, it's critical that we encourage voters to cast their ballots as safely as possible. To understand the best ways to accomplish that goal, I was appointed to the Select Committee on 2020 Emergency Election Support by Secretary of State Bill Gardner. Our unanimous, bipartisan recommendation was for every eligible voter in New Hampshire who wishes to register or vote do so absentee for the safety of both the voter and our dedicated election workers. You will find links to information and forms that allow for easier access to absentee registration and voting in the full version of this article at <http://nhms.org/members-corner>.

I would ask that we, as physicians and physician assistants, share this information with our patients. Many of our patients are of an age and have comorbidities that place them in a high risk category should they contract COVID-19. Our office staff can simply download and print out the absentee ballot application and give this to each patient on their departure. Encouraging and enabling our patients to vote absentee may well be a critical component of their treatment plan as well as beneficial to the public health of the state. I thank the New Hampshire Medical Society who stands ready to help you with any questions you might have. NHMS's Director of Advocacy, Michael Padmore can be reached by phone (603) 858-4744 or by email at [Michael.Padmore@nhms.org](mailto:Michael.Padmore@nhms.org). For additional information, please contact the New Hampshire Secretary of State's office. Thank you again for your tireless work. As long as I am in office, I will continue to advocate for policies that allow for you to do your job and treat your patients as effectively as possible. Please feel free to contact me with any questions or concerns on my cell at 603-828-9620 or by email at [tom.sherman@leg.state.nh.us](mailto:tom.sherman@leg.state.nh.us). ■

**VOTE BY  
MAIL**



**2020 United States Presidential Election**



**SCIENTIFIC MEETING PROGRAM OCTOBER 23, 2020**

- 07:30-08:00 Zoom Registration/Verification
- 07:45-08:00 Opening Remarks and Welcome: William Palmer, MD, FACP
- 08:00-09:00 COPD Management Made Easy: Graham Atkins, BSc, MBChB, MRCP
- 09:00-10:00 The Science and Practice of Effective Brain Health Promotion:  
John Randolph, PhD, ABPP
- 10:00-10:30 BREAK & View Posters
- 10:30-11:30 M&M: Kenton Powell, MD, FACP
- 11:30-12:30 "ACP Vision of US Healthcare": Robert McLean, MD, FACP
- 12:30-01:30 LUNCH and View Posters
- 01:30-02:30 Sex, Death and Burnout; Shared Topics in Which We Talk Poorly:  
Adam Schwarz, MD, FACP
- 02:30-03:30 Frailty: What is it? Can we Measure it? Can we do Something About it?  
Daniel Stadler, MD
- 03:30-04:15 Resident Poster Competition
- 04:15-04:45 Town Hall Meeting
- 04:45-05:00 Wrap-up

**SAVE THE DATE! October 23, 2020**  
 More details to follow  
[Catrina.watson@nhms.org](mailto:Catrina.watson@nhms.org)

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**Mission:** *Our role as an organization in creating the world we envision.*

*The mission of the New Hampshire Medical Society is to bring together physicians to advocate for the well-being of our patients, for our profession and for the betterment of the public health.*

**Vision:** *The world we hope to create through our work together.*

*The New Hampshire Medical Society envisions a State in which personal and public health are high priorities, all people have access to quality healthcare, and physicians experience deep satisfaction in the practice of medicine.*

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