

The Society of Women in Urology



W i n t e r 2 0 0 2

President's message

Catherine Rhu deVries, M.D.

After last year, we are increasingly realizing the need for good communication with other members of our communities and with each other. Have you wondered why you did not receive a printed Newsletter in the fall? Welcome to the new and updated communication media for the Society of Women in Urology.



Catherine Rhu deVries, M.D.

If, by chance, you did not receive our e-mail *Newsblast* this past autumn, we would like to know so that we can update our mailing list. Most of us now own computers and some are so compulsive that they check their e-mail many times each day. We hope that the *Newsblasts* will be a welcome and informative addition to your Inbox.

A number of new things are up and ready for your review. The website, hopefully, has your current information. It is a means for patients and colleagues to contact you, which should enhance your practice via self-referral by those seeking women urologists. Check it out at www.swiu.org.

Also on the website are information pages for the Elizabeth Pickett Research Award as well as the Manthos Mentoring Award. Now is a great time to review these and to send in your nominations for the mentoring award.

For those planning to attend the AUA Annual Meeting, your board has been active in efforts to provide several options for childcare and Kids Camp in Orlando. Martha Terris, M.D. and Tracy Cannon, M.D. have spearheaded this effort with the AUA on our behalf. As you are making your plans for this spring, consider bringing the family!

We are eager to begin outreach efforts to women medical students who may not have considered Urology as a career. The American Women's Medical Association holds social events as well as career events at each medical school. Please consider attending these because, as you know, urology residencies have become highly competitive. Applicants will need to make their plans early in order to be ranked highly. Consider mentoring a student or two. They will become your colleagues for life! ♦

HIPAA: The 500-Pound Gorilla

By Barbara Harty-Golder

Treasurer, Florida Medical Association

Imagine being the purchaser of a second-hand computer, only to find that is contained pharmaceutical records of hundreds of patients whose prescriptions had been filled by the local drugstore. Or imagine walking down the street and

finding hundreds of medical records that had blown out of a truck on its way to a recycling center. Or that your teen discovers your medical records posted on the net by accident by your insurance company. Or that, shortly after having your estrogen replacement prescription filled, you receive a solicitation for osteoporosis medication from the pharmaceutical chain where you bought your meds.

These and many similar incidents prompted Congress to address the issue of medical confidentiality in the Health Insurance Portability and Accountability Act (HIPAA). The final regulations implementing a standard federal rule for medical information management are – to many observers – a logistical and economic

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nightmare. The rules are so cumbersome, vague and overboard that they have sparked a firestorm of controversy, and a variety of organizations, including the AMA, are working to modify them before the April, 2003 implementation deadline, and the Bush administration has acknowledged that some changes are necessary.

Even if the rules are eventually changed, some federal regulation of patient confidentiality and release of information will be adopted, and the rules will require changes in office practices. Leaving HIPAA implementation to the last minute is not a wise strategy, so the smart physician will start educating herself now – both to understand the potential requirements and the problems they create. For instance:

HIPAA creates new requirements for obtaining permission to release medical information, including the obligation to track when releases are made. This alone will effectively double the paperwork required in managing medical records. Gone are the days when it was presumed that physicians could exchange information about a patient in the course of caring for that patient. After HIPAA, a specific release is required. It's probably a good idea to implement HIPAA compliance releases now so that, once full implementation occurs in 2003, you may still use old information already in your medical records from other sources.

HIPAA makes the definition of "protected information" absurdly broad. For example, some compliance offers are requiring lab staff to remove labels from specimen containers before disposing of them, because the label contains the patient's name and could, under the definitions of HIPAA, be considered protected health information. This not only means extra work and expense, it exposes lab staff unnecessarily to additional risks in handling infectious waste. And remember, under OSHA, those biohazardous materials must be incinerated – presenting very little risk of any meaningful information about a patient even being disclosed.

HIPAA covers oral disclosures. Curbside consults, if they are identifiable as pertaining to an individual patient are, and require a release – and tracking.

HIPAA requires physicians to have a written confidentiality policy, and to give notice to patients of their rights under the law and how their medical information will be managed. This means a written policy, a designated "confidentiality czar" and documentation that staff and business associates have been trained in confidentiality rules.

HIPAA provides stiff penalties for breaking the rules. Depending on circumstances, improper disclosure of medical information can result in massive fines – up to \$250,000 if circumstances are egregious enough. Enforcement will be through the Office of Civil Rights (OCR).

HIPAA prohibits most disclosures of information for non-health care purposes. Physicians who deliberately or inadvertently, supply medical information that is used to make employment, financial or other non-medical decisions will face severe penalties.

HIPAA permits patients the right to view and amend their medical records. The ability to view a medical record is generally granted, even in the most restrictive state laws, but the right of a patient to request that a record be amended may present additional legal liability to treating physicians because of the potential for medical information to be muddled or excluded from the record. ♦

The Wave of the Future... Update on the Status of Women in Medicine

*"The wave of the future is coming and there is no stopping it."
-Anne Morrow Lindbergh*

In a recent salute to women physicians, Dr. Kay K. Hanley points out that the increasing number of women in medicine will shape the future of the profession. In the U.S., women have been accepted into medical school over the past 150 years, but quotas kept numbers low, and restrictions on practice opportunities as well as the attitudes of the women trainees themselves limited their career paths. The enactment of federal antidiscrimination legislation and the commitment of the Association of American Medical Colleges to an equal opportunity policy finally opened wide the doors of America's medical schools. Gradually, women felt free not only to pursue a career in medicine, but to extend the scope of their practices beyond the traditional "female specialties" - pediatrics, OB/GYN, internal medicine, family practice and psychiatry. Although two-thirds of women residents are still training in these specialties, 1990 statistics cited women trainees in all specialty areas within medicine. It was further noted that approximately 30% of all residents at that time were women. Today, women make up nearly half of the medical school population, and it is estimated that women will account for about one-third of ALL physicians by the year 2010. Given that there is strength in numbers, our collective voice should have a dramatic effect on the character of medical practice in the future. ♦

Truth

*"In a good surgeon, a hawk's eye; a lion's heart;
and a lady's hand."*

-Leonard Wright

Make Orlando a Family Affair

There's good news for those of you who want to bring your children to the AUA Annual Meeting in Orlando, but lack resources for childcare. Help is just a mouse click away. Check out the website go2orlando.com. Click on <kids>, then click on <childcare>. The site lists eight options for short-term childcare. All of the providers listed assert that they are bonded and certified and indicate that background checks are done on all employees. Both in-room and out-of-room services are provided for infants and children up to 16 years of age. Some of the businesses rent equipment such as strollers, car seats, cribs, etc. So, for those of you thinking of attending the Orlando meeting, consider including the kids and make it a family affair.

Did You Know? _____

Women have been healers since ancient times. In Egypt, where women played a dominant role in all aspects of society, women professors taught in medical schools and female medical students were commonplace. The biblical hero Moses and his wife Tsipporah were both medical students in Heliopolis about 1500 B.C. ♦

Medical Meetings: More Gain than Pain _____

Much like organized religion, many regard organized medicine with a healthy dose of skepticism. "It's an old-boy's network," "What's in it for me?," and "It's not worth the time and the money." are but a few of the attitudes expressed by those who harbor this anti-establishment mentality. Avoidance of meetings is a logical extension of this philosophy. True, it is often difficult to feel one is able to make a difference in or that one can benefit directly from the activities of a large organization. It is also true that society memberships can be expensive with little to show for the dues other than a journal which may be accessed in any hospital library. Even if one is sold on the benefits of belonging to a given organization, attending meetings may still seem like a huge imposition, requiring time away from practice and family, another significant demand on one's time. Aside from the opportunities for networking, meeting friends and, possibly, traveling to a particularly appealing spot, it seems so much easier to curl up at home with the abstracts or the course syllabi/CD-ROMs or the videos of the latest operative techniques. That's what technology is for, after all - convenience.

If one is in academia, meeting attendance is almost *de rigueur*. It is important to see and be seen, to network with colleagues, to promote one's work, to be recruited, to seek collaborators or to ferret out cutting-edge research before it finds its way to paper. But even for the nonacademic, there is a wealth of good to be gained from journeying beyond one's usual sphere. Two kinds of didactics occur at meetings: formal, i.e., the various presentations and programs comprising the formal agenda and informal, the verbal exchange of information that usually occurs between sessions. The latter can result in both personal and professional growth, from learning about time saving tricks in the OR to sharing tips on child-rearing. Such intellectual stimulation may be refreshing, especially when perusing journals has largely been supplanted by bedtime readings of *Brer Rabbit* or Harry Potter. Beyond the sessions, the change of pace and opportunity for recreation can be rejuvenating and allow time for reflection. To paraphrase Jimmy Buffet, "Changes in latitude [bring] changes in attitude."

It is clear that getting information in "real time" is far superior to seeing it digested on paper. As Woody Allen said, "80% of life is showing up." One has to be there to get the whole story, the big picture. Abstracted or second-hand information is necessarily incomplete, reducing its educational benefit. One can't query a journal. Further, if there seems to be less and less time in one's life for professional reading, a meeting can provide a concentrated update on current thought in a given discipline.

Finally, it is usually possible to get a large chunk of one's annual CME requirements out of the way by attending meetings. Sitting with friends in didactic sessions can be a very constructive form of multi-tasking as well as just plain fun. Work and play are not mutually exclusive. So, if you've been thinking about sitting out the AUA or other meetings this year, reconsider. A dose of the outside world may be just what the doctor ordered.

Chicago Welcomes Women of NCS AUA

By Deborah Lightner, M.D.

The North Central Section Meeting of the AUA was moved to Chicago in January

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Society of
Women in Urology

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2001 - 2002

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FOUNDED IN 1980

because of concerns about travel to Cancun last October. The Windy City proved mild in weather and warm in spirit. The meeting was attended by 17 female urologists and urologists-in-training, with a smaller contingent of us gathering for lunch on the first full day of the meeting. This luncheon, sponsored by Bayer, served as a collegial gathering for old friends and for establishing new ones. We appreciate the support of Brian Hansen and his colleagues from Bayer and Wendy Weiser and Associates, our Executive Directors. We hope to make the sectional get-togethers an expanding means to enhance the careers of our female colleagues through friendship, mentoring and professional development. I personally challenge each of us in our sections to organize an event to pull together the women who attend the meetings - if not a dinner, then a luncheon or a cocktail hour. Go get a sponsor. These meetings will give us greater visibility, improve our collective voice and, on a personal level, give us a larger circle of colleagues and friends! ♦

The Chrisina Manthos Mentoring Award

Christina Manthos was an extraordinary young urologist whose life and career were sadly curtailed by breast cancer. The SWIU, as a means of perpetuating the flame of her inspiration and honoring her memory, has established an annual award to recognize those men or women who demonstrate extraordinary mentoring skills in supporting the career of a female urologist. The SWIU believes that a mentor is an important element in the life of each professional woman and wants to encourage and reward those who set a good example.

To submit a nomination for the Christina Manthos Mentoring Award, please contact the SWIU at 847-517-7225 or e-mail info@swiu.com. ♦

Elisabeth Pickett Research Award Program

The Elisabeth Pickett Research Award Program makes funds available for small



research grants for basic science or clinical urologic research. The awards may be used to continue or supplement a current project or to initiate new study. Each candidate for the award must be a trained urologist (MD/DO), a urology resident/fellow, or a post-doctoral basic scientist with a research interest in urologic related diseases and dysfunction. Each candidate must also be a

current member in good standing with SWIU.

To request an application, please contact the SWIU at 847-517-7225 or e-mail info@swiu.com. ♦

The 2001 Elisabeth Pickett Research Award Winner

Anne-Marie Houle, MD

SWIU Would Like to Thank the Following Corporate Sponsors for their continued generosity and commitment to SWIU

- Abbott Laboratories
- American Urological Association
- Bard Urological Division
- Bayer Corporation, Pharmaceutical Division
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Address Corrections Requested

Please notify the SWIU of any changes in your contact information, including change of address, phone or fax numbers, and email address. This information is only disseminated to the membership and is used for networking, one of our primary missions. ♦

Thank you.

Call for SWIU News Contributions

If you have an idea for a column, wish to contribute to the newsletter, or have comments about the newsletter, please contact Dr. Nina Davis. We are particularly interested in information regarding job prospects, as well as individual achievements, both personal and professional.

Nina Davis, M.D., *Editor, SWIU News*
Society of Women in Urology

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Society of Women in Urology Program Schedule & Registration

BREAKFAST MEETING *(Location TBD)*

Sunday, May 26, 2002 6:30 a.m. – 9:00 a.m.

Tentative Schedule:

6:45 a.m. Welcoming Remarks
Catherine deVries, MD, President, SWIU

6:50 a.m. AUA Update

7:00 a.m. Featured Speaker – Lynne Levesque
Breakthrough Creativity: Beyond Creative Juggling

8:00 a.m. Annual Business Meeting

8:30 a.m. Networking

9:00 a.m. Adjourn

NETWORKING RECEPTION *(Location TBD)*

Tuesday, May 28, 2002 5:30 p.m. - 7:30 p.m.

There is strength in numbers! The Society of Women in Urology welcomes you to its reception. This is a great opportunity to meet with other female urologists to discuss the issues facing women in the field of urology, as well as other medical issues. In addition, receive membership information to join SWIU. We look forward to this great networking opportunity every year and hope to see you there!

Featuring:

Presentations by recipients of the Elisabeth Pickett Award & The Christina Manthos Mentor Award

Please indicate which event(s) you will be attending.

SWIU Breakfast Meeting

Self Guest

SWIU Networking Reception

Self Guest

Name: _____

Spouse/Guest: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Please mail/fax this form to the SWIU office:
1111 N. Plaza Drive, Suite 550
Schaumburg, IL 60173
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