

**Journal of American Physicians
and Surgeons**

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Omnia pro aegrotis

Copy Editor

Stuart Faxon

Cover Design

Rachel Eck

Typesetting and Printing

Skyline Printing Co., Inc.

Tucson, AZ

Website

www.jpands.org

Webmaster

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1601 N. Tucson Blvd, Suite 9

Tucson, AZ 85716

*Journal of American Physicians
and Surgeons* (ISSN 1543-4826)

is published quarterly.

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Correspondence

Report from a State Medical Association on Fighting the Federation of State Medical Boards (FSMB)

I just spent two grueling days at our state medical society's House of Delegates meeting. I had introduced a resolution opposing the Interstate Medical Licensure Compact, which was discussed in the spring issue.¹ My resolution was supported by my whole district. However, a member who has had previous connections with the state medical board spoke against it, as did the president of the American Academy of Dermatology. It ultimately was referred to the Council.

Another resolution called for the state medical board to quit its membership in FSMB. The language was modified to call for "monitoring" the situation, significantly weakening it, but the message came out loud and clear that physicians are not happy about Maintenance of Certification/Maintenance of Licensure. It was vigorously opposed by a previous president of the American College of Emergency Physicians and by the president of the American Academy of Dermatology. I guess once people move into positions of that type, they contract some sort of deadly virus.

Of greater concern than the resolutions is the direction in which "organized medicine" is headed. My district and I are united in fighting an effort that seems to be sweeping the rest of the country as well, which is eliminating the state medical society's House of Delegates and replacing it with a council of a few people who are largely appointed by the few "leaders." Apparently this is being tried in Iowa and Minnesota. It reportedly failed by a small margin in Pennsylvania.

Our society's executive director is a lawyer who has been around for many, many years. Apparently, he was able to convince certain leaders to alter the bylaws last year to add some delegates at-large. These turned out to be people who were beholden to hospitals. Then they formed a

task force primarily to arrive at a conclusion to eliminate the House of Delegates and trust the direction of the organization to a few doctors who will likely be under the jurisdiction and control of a lawyer!

My district organized several other districts to mount a significant blockade. We fought it hard before the Reference Committee, but the tricks of the opposition, including the association's legal counsel, were astonishing. They had initially maintained that such a bylaws change would only require a 50 percent majority, and not a two-thirds majority, as is specified! It was utterly frightening to see the medical students and residents argue for this huge bylaws change. I don't think medical students and residents should be encouraged to be observers, but they either don't know enough to vote, or they have been thoroughly indoctrinated by the collectivists. They obviously do not believe in democracy.

The result was that the Reference Committee recommended rejection of this initiative, probably realizing they didn't have the two-thirds majority to get it passed. But it will be back. The end result of this is likely to be a bunch of hospital doctors running "organized medicine" under the direction of a lawyer. The future is downright scary, but that is the reality.

Kenneth D. Christman, M.D.

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1. Snavelly J. The Interstate Medical Licensure Compact: claims vs. reality. *J Am Phys Surg* 2005;20:20-22.

Erratum

There is a reversal error in Dr. Graveline's article in the spring issue.¹ Atorvastatin, simvastatin, and lovastatin are lipophilic statins, and rosuvastatin and pravastatin are hydrophilic, not the reverse as was stated.

1. Graveline D. Adverse effects of statin drugs: a physician patient's perspective. *J Am Phys Surg* 2015;20:7-11.