## Physicians Bulletin



SEPTEMBER/OCTOBER 2020

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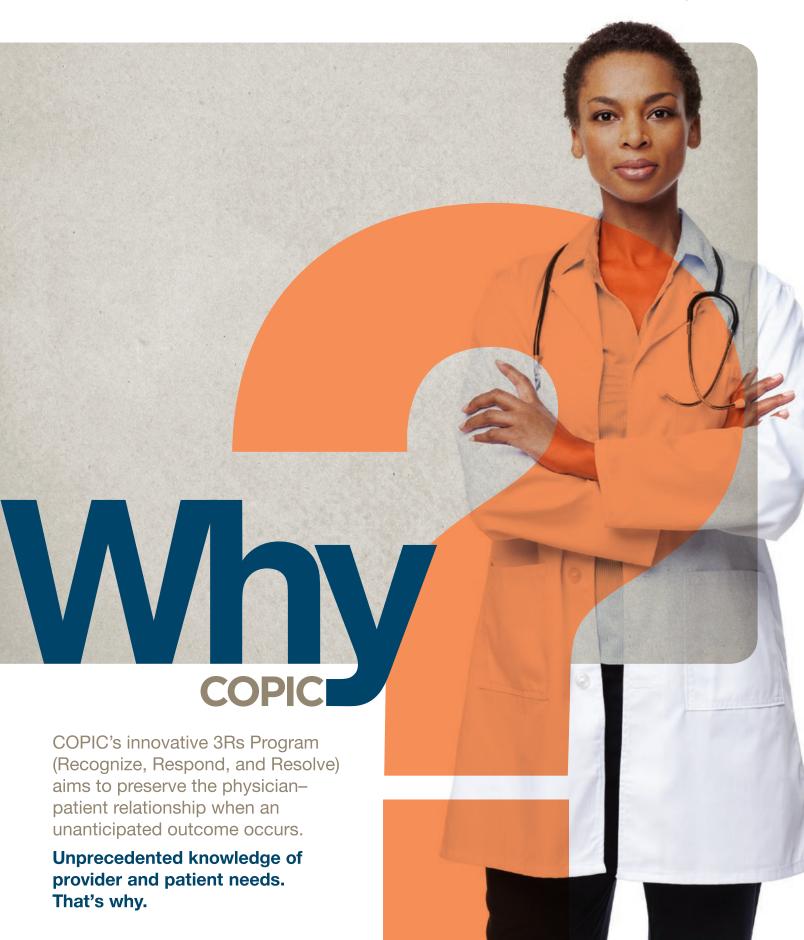




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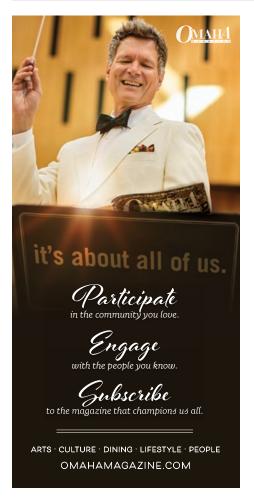






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#### LESSONS LEARNED WHEN RIDING A BIKE



AUDREY PAULMAN, M.D.
Editor
Physicians Bulletin

Six months into the pandemic, I decided to buy an e-bike. I had ample time to research e-bikes, learning about battery packs, throttles, displays, motors, pedal assists, chargers and shifters. I felt educated, and I was ready to go out and make the purchase.

It was really simple. I secured my bike, a Giant Liv Amiti. We then went to find an e-bike for my husband. As he is tall, he would need an XL frame, such as one made by Trek and available locally.

I was excited. For the first time, I could keep up. After riding in a brief rain shower, I realized that my bike came without some needed equipment. Fenders were added, along with a carry rack and a water bottle holder.

How did we eventually decide upon the bikes and accessories we bought? They were the ones that the store had. The bike shops could not guarantee that newly ordered bikes would be shipped anytime soon and, with increasing tariffs, the prices could not be guaranteed.

Once purchased, our new bikes needed a new car rack. I researched best racks, and selected one, but ended up buying the only one that was available. A biking friend of mine couldn't get a replacement tire at the first local three stores he contacted, so when he found a tire, he bought four, so he would have spares. Hoarding bike tires is now a thing.

Apparently the pandemic has now hit the bicycle shortage stage. We all do what we do to survive.

Long summer days led to long e-bike rides, now possible without regard for hills. It felt normal for a while, as if the world had not changed in 2020.

We chose the Oak Creek Trail, heading from Brainard to Valparaiso, going through Loma, of the Patrick Swayze movie fame. The cornfields and bean crops were spectacular, the sun bright, and the temperature perfect. It was the kind of day that makes one glad to be a Nebraskan.

Alas. There was a hole in the trail. I think it was a gopher hole, but I am not an expert on holes in trails. It hidden by some vegetation, and my front tire dropped into the hole. I went sliding to the ground with a thud.

I checked myself over, finding abrasions and a sore shoulder. Nothing felt broken, so I finished the ride.

I prescribed some rest for my injuries, choosing to binge watch some Netflix.

And then the medical side of me took over. If I went to the emergency room, how would this be coded under the ICD-10 codes?

I looked, but didn't see any specific to injury due to riding an e-bike into a gopher hole. It did give me a chance to look at the other codes, as follows, some that made me smile.

**W220.2XD:** Walked into lamppost, subsequent encounter

W61.33: Pecked by a chicken

**W61.62XD:** Struck by duck, subsequent encounter

"...I wonder which injuries at home will show an increase as we spend the days in new ways, like growing gardens, making bread, cleaning closets, Zoom meetings and encounters, and, in my case, crashing into a gopher hole when riding my e-bike."

- AUDREY PAULMAN, M.D.

**W55.41XA:** Bitten by pig, initial encounter

W59.22XA: Struck by turtle

R46.1: Bizarre personal appearance

**Z63.1:** Problems in relationship with in-laws

**V9135XA:** Hit or struck by falling object due to accident to canoe or kayak

Y93.D1: Stabbed while crocheting

**V00.01XD:** Pedestrian on foot injured in collision with roller-skater, subsequent encounter

When the pandemic is over and insurance companies have a chance to look at the increased morbidity of 2020, I wonder which injuries at home will show an increase as we spend the days in new ways, like growing gardens, making bread, cleaning closets, Zoom meetings and encounters, and, in my case, crashing into a gopher hole when riding my e-bike.

I think I will tell them there should be a code for this.

We will learn much once about what we have experienced once 2020 is over.

Stay well. Stay close. You have friends at the Metro Omaha Medical Society. I hope you enjoy this edition.



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## MOMS IS THE MEGAPHONE



COURTNEY HELLMAN, M.D. Membership Committee Chair Metro Omaha Medical Society

s we all grow accustomed to our new daily lives donning PPE and hearing about all of the changes made throughout all of our industries, many are re-evaluating their priorities. ZOOM, Facetime, Skype, Microsoft Teams and other online chat groups are now the norm. The evenings in the backyards with friends, wine and laughter are now not done or if they are, only a few guests are allowed. It has become more difficult to keep in touch outside of work with casual friends.

This is where MOMS is incredibly helpful. The great team behind the scenes of MOMS makes it easy to spend an evening with friends online to watch comedy shows and other stress-relieving activities. MOMS also provides educational seminars to help decrease worries on issues such as retirement and financial planning.

If you are struggling to cope with any depression the lack of social contact has brought, there is always the link on the MOMS website to use. Additionally, it is easy through MOMS to help continue to be part of the multiple groups of physicians such as the Young

"There is no other group in town that has members from the private community, from Boys Town, from Methodist, from Children's, from CHI/Creighton, and from Nebraska Medicine. You can be a member of MOMS whether you are employed by a hospital or if you are not. MOMS is a group that welcomes all."

- COURTNEY HELLMAN, M.D.

Physicians group, the Women in Medicine Group, the Retired Physicians and many others. If you have an interest, MOMS can help you find a group or create a new one.

The financial crunch the medical community and the larger economy has suffered has obviously made times different. The easy extra medical education stipend you had from your group or hospital may have been used to keep the doors open.

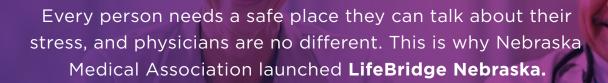
The question remains "Is it worth it to join MOMS?" I would say absolutely yes! There is no other group in town that has members from the private community, from Boys Town, from Methodist, from Children's, from CHI/Creighton, and from Nebraska Medicine. You can be a member of MOMS whether you are employed by a hospital or if you are not. MOMS is a group that welcomes all. For the younger physicians, this is an easy way to connect with others on a social level—and maybe

glean some advice on a certain case you may be performing in the future. For the older active members, remember this is a great group of men and women who have lived through the multiple changes in Omaha and its surrounding community, and seen how the practice of medicine is evolving. It is nice to share memories of the old while celebrating the new while also catching up on you children in college and your newest great medical challenge.

For the retired members, you have lived the "good old days" and now can talk about your grandchildren, the big fishing trip you have taken, and keep in touch with younger physicians practicing and impart advice from your many years of experience. Everyone has something to add.

The rest of 2020 and going forward is going to be a challenge for all of us. We have new ways to communicate in our organizations, new mandates to enforce on ourselves, our employees, and our patients. The computer and its connections have become our new way of life. MOMS already has adapted to the computer communication mode and wants to make sure you are still able to stay in touch with your medical comrades. Consider having a beer and watching the upcoming virtual comedy show, with another friend or two. Keep in touch with other friends at other hospitals by joining MOMS and joining the groups of likeminded physicians during the caucus.

MOMS has so much to offer. Also, remember, being a member of MOMS brings you discounts on other parts of your life-so join now. If there was ever a time for physicians to unite into a voice, it is now. MOMS is the megaphone.





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LifeBridge Nebraska is a physician-driven, peer-to-peer wellness program launched with start-up funding provided through the Nebraska Medical Foundation and oversight conducted by the NMA. This program has been designed by your physician peers through a volunteer ad hoc group comprised of leaders dedicated to physician wellbeing.

## FINDING THE SILVER LINING



AMY REYNOLDSON

Executive Vice President

Nebraska Medical Association

ometimes when things are falling apart, they may actually be falling into place,"(by J. Lynn) is a quote that keeps surfacing as we navigate this pandemic. Given all of the disruption that COVID 19 has brought to our lives, there has been some silver lining among all of the chaos.

Throughout the past seven months, we have watched the health care world embrace and adopt telehealth to ensure patients are provided health care in a safe and effective way. I have had a front-row seat observing multiple organizations from a variety of interests come together to work for the same goal. In talking to many of you it has been mentioned that Nebraskans are resilient and have not hesitated to be part of the solution to ensure that healthcare is provided in a safe manner by donating PPE supplies, businesses changing their focus and producing PPE supplies and hand sanitizer due to the increased need, and businesses allowing staff to work from home to ensure their safety.

At the same time that COVID-19 was gaining momentum and penetrating our communities, the NMA was working diligently to develop a comprehensive physician wellness program called LifeBridge Nebraska. Perhaps you recall me mentioning this in my previous articles? LifeBridge Nebraska is now available for all Nebraska licensed physicians to utilize for free when you need a safe place to talk about your stressors and situations. LifeBridge is a peer-to-peer coaching program that

allows physicians to address normal life difficulties and the challenges that come with being a physician. Confidential appointments are self-referred without medical diagnoses, insurance billing or any health records. Physicians are no different in that you deserve an opportunity to seek support for your acute or chronic stress rather than just "powering through." Make sure to share this resource with your peers should a situation arise when they just need a safe place to land. Connect with LifeBridge Nebraska by calling (888) 569-2036.

I truly believe that it is not by coincidence that LifeBridge Nebraska is being launched during a global pandemic. Back in September 2019, we set the "go live" date for July 2020 and for many working on this project maybe felt that this was a pretty ambitious timeline. Even I did not know if this was possible, but I knew we had a great group of physicians working on this project that could help us get it across the finish line.

Looking back now the timing could not have been more perfect. COVID-19 has exacerbated many of our lives and current situations so perhaps it felt even more difficult given the additional stress and burdens placed on you because of you are a physician.

Nebraska is no longer on the short list of four states that does not have a comprehensive statewide physician wellness program according to the Federation of State Medical Boards. We may have been near the last to get this accomplished but according to one of my colleagues from Idaho who has been a leader in this space, Nebraska is the first state to implement a peer-to-peer physician wellness program.

Over the last six months, there has been an opportunity to learn more about how we, as a society, will adjust to such disruption as COVID-19. I am continuously impressed by the work of many of our members and how they displayed great character to assist their patients' which reached far beyond the medical needs. Some helped secure food and lodging, provided medical treatment without pay, volunteered

"I am continuously impressed by the work of many of our members and how they displayed great character to assist their patients' which reached far beyond the medical needs."

- AMY REYNOLDSON

at food banks to hand out care packages, provided guidance to large businesses to ensure safety measures were in place, counseled school boards on safety protocols, just to name a few.

Even though the NMA was not able to hold our Annual Membership Meeting in person, we were able to provide a wonderful event virtually for more than 150 attendees. Michelle Walsh, M.D., was installed as the NMA president. Dr. Walsh is a pediatrician in Lincoln at Pediatrics, PC. She obtained her medical degree from University of Iowa College of Medicine and completed her pediatrics residency at Children's Mercy Hospital in Kansas City, Missouri. Dr. Walsh is a member of the American Academy of Pediatrics, Nebraska Medical Association, and Lancaster County Medical Society, which she is also a past president.

Again, what great timing to have a pediatrician as our NMA resident. As many of you may know we are experiencing a substantial reduction in vaccinations, in particular childhood vaccines. Who better to have as our president during a downturn in vaccines but a pediatrician?

As I reflect back on the last seven months, we have had a lot of great things "fall into place" because of other things "falling apart." Look at all of the wonderful situations, programs, and stories that have surfaced because of COVID-19, because of our perseverance and ability to lean into a difficult situation and find the silver lining.







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#### **INVESTING IN COMMERCIAL REAL ESTATE** WITHIN THE COVID **PANDEMIC**

Physicians Bulletin • September/October 2020



KIM MATNEY Commercial Division Berkshire Hathaway Home Services

he COVID pandemic has affected every area of our lives and every industry, including commercial real estate. Many industry experts concur that while hospitality, office and retail segments were hit the hardest with their sales figures and lease rates dropping due to sudden lock down, then the current extended limited capacity requirements, there continues to be a healthy demand within the medical and industrial segments as they continue to sell and lease at Pre-COVID rates.

The demand for multi-family continues to be stable even with the recent eviction moratoriums. The demand has increased for health care and industrial space, with hospitals across the United States suddenly expanding square footage of hospital bed use into other areas of their facilities to accommodate COVID patients and industrial warehouse space is rapidly being acquired by many corporations, including Amazon, to meet the increased consumer demand for products delivered right to your door.

Many economists are stating that COVID is not a financially oriented downturn. The pandemic suddenly shut down almost every major industry. This sudden and severe response to COVID has created highly unusual data which has made it challenging for experts to forecast.

COVID has put a focus on relationships. Banking relationships and relationships between landlords and tenants. The stronger these relationships were before COVID, the more they can be counted on to assist in surviving this pandemic.

The quick innovation of several U.S.based companies on new ways to sanitize public spaces in airplanes and buildings through COVID Fogging Sanitation has helped to build consumer confidence.

Many investors are confident we will see a recovery soon and that is evidenced by the transactions that are currently taking place. There are also many other investors that are waiting it out and taking a pause before making their next acquisition or selling an asset. Many industry experts believe that there are a lot of deals waiting on the sidelines that will likely promptly take place once the pandemic is solved.

Meanwhile, developers are already planning for our "new normal" by modifying the plans for existing developments already in progress and setting a new trend for future development. In addition to accommodating the necessity for physical distancing by creating alternate operational entrance and exits, widening the areas of pinch points and security check points to allow for proper physical distancing, developers are now focusing on Well Building specifications more intently now than ever before, ensuring the building is designed to promote mental well-being.

"The demand has increased for health care and industrial space, with hospitals across the United States suddenly expanding square footage of hospital bed use into other areas of their facilities to accommodate **COVID** patients"

- KIM MATNEY

COVID is also forcing the allocation of a larger portion of developers' budgets towards the touchless technologies that were at one time previously considered upgrades are now considered essential necessities. These touchless technologies will be seen throughout buildings, including touchless upgrades to bathrooms with wave-to-unlatch stall doors and touchless automated toilet paper dispensers to keep people safe and reduce pathogens in buildings.

Consumer confidence will fuel economic recovery. A COVID vaccine to help build herd immunity could do a lot to fuel consumer confidence. The human cost of the COVID pandemic has been overwhelming. Many people believe that it is just a matter of time before the global medical community develops a COVID vaccine that may possibly allow us all to return to a new sense of well-being within a new normal.





R. Woodward, M.D., will know when he's progressed as a beekeeper.

"The difference between a novice beekeeper and an intermediate one is being able to find your queen," he said.

This means, Dr. Woodward is somewhere in between. He can locate the queen in one of his bee hives—but can't seem to spot the queens in the others.

His interest in beekeeping started as he looked to redirect his attention as his medical practice wound down (Dr. Woodward no longer performs orthopedic spine surgery, but works in a wound center and serves as a medical consultant).

During his transition and as he was looking to refocus, beekeeping kept him busy. "As a kid from farm country, I was used to animals. Beekeeping seemed to be a natural fit." One that is more complex than he originally thought. His hobby introduced him to a whole new set of friends, he said, while keeping him connected to old ones, including an operating nurse and an anesthesiologist. Both have mentored him in beekeeping, he said.

His first encounter with bees, he recalled, came as he, then 10 years old, walked along a street in his hometown of Walhalla, North Dakota. A bee from a nearby apiary (a location where beehives of honey bees are kept) stung him.

"The beekeeper told me not to move. He pulled out the stinger. It didn't hurt at all."

So Dr. Woodward moved on. Next came college, medical school, practice and family.

Sixty years later, he found himself at a crossroads in life: How to spend his time in semi-retirement. He decided to attend at seminar on beekeeping. At the same time, he heard that a Columbus man—who turned out to be allergic to bees—wanted to sell his hives. He bought beekeeping equipment from a cousin and joined the Omaha Bee Club (more about that later).

Next, he needed a place for his hives. Dr. Woodward had purchased 10 acres of land north of Omaha years ago with the intention of building a home there. That never happened and his sold the property to his daughter, who did.

**CONT. PAGE 20** 



## The Woodward File

**Hometown** Walhalla, North Dakota

#### **Undergraduate Degree**University of North Dakota

University of North Dakota in natural science

#### **Medical Degree**

Northwestern University in Chicago

#### Residencies

University of Iowa in surgery, University of Chicago in orthopedics

#### **Fellowship**

University of Rochester New York in orthopedic spine surgery

#### **Specialty**

Orthopedic spine surgery

#### Institution

Nebraska Spine and Pain Center, Nebraska Spine Hospital

#### **Hobbies**

Beekeeping and yardwork

#### **Family**

Wife, Connie Woodward; four grown children, who all work in medicine

#### Why He Joined MOMS

"I joined as soon as I came to town. I did it to support medicine in the Omaha area and to network."

#### FROM PAGE 19

The land provided ample space for his hives—and far enough away from his daughter's home. Now, depending on the time of year, Dr. Woodward may visit his hives weekly or several times a month. "In the winter, I'm not out there at all."

First some background information about beekeeping: You can buy packages of bees—complete with a queen—for your hives. They can be sent through the mail, but the Omaha Bee Club orders in bulk for its members. A package of bees weighs between 3 and 4 pounds. "You put them in a hive and they go to their business of laying eggs (the queen) and you start collecting honey."

His hives thrived his first year. He collected honey, bottled it and gave it to friends. Later, he realized he had been too greedy with his honey collection, and his hives suffered. Lesson learned: Bees require ample honey to get them through the winter.

Currently, he has one hive that is thriving, one is empty and two are somewhere in between. He plans to split the thriving hive with the empty one—another lesson he has learned in beekeeping. He'll place queen larvae in the targeted hive and hope it thrives. Here are some other things he has learned about beekeeping along the way:

- During cold-weather months, bees form a tight ball. They flap their wings to produce heat, which maintains the hive. Those on the inside of the ball rotate with those on the outer part. "This way they all take a turn at staying warm." During warmweather months, they spread out and fan themselves.
- Hives include drones, worker bees and a queen. A worker bee during summer lives just five to six weeks. "They literally work themselves to death." The drones mate with the queen, and then they die. The queen, after mating, will lay eggs for several years.
- Like humans, bees suffer from disease.
   The Varroa destructor is an external parasitic mite that attacks on feeds on honey bees. Dr. Woodward said he sees similarities between treating humans and bees.

- "You ask 10 physicians about a challenge with a patient and you may get 12 different answers. You ask 10 beekeepers about a disease that affect bees, and you'll likely get 12 different answers."
- Some beekeepers put small dabs of paint on their queens, which helps identify them in their hives. The companies that provide packages of bees will similarly identify the queen in each. "But you'll pay a little extra."
- Queens can be artificially inseminated. "I would imagine you'd have to have a strong magnifying glass to pull that off."

Dr. Woodward recommends the Omaha Bee Club to anyone who expresses an interest about beekeeping. The club hosts regular meetings, typically attended by 60 to 70 people, that feature speakers about topics related to beekeeping. More important, attendees are always willing to answer questions and give advice.

Beekeeping can be a solitary hobby, Dr. Woodward said, but he's noticed that his 4-year-old grandson, Owen, has some interest. The boy shows curiosity about what his grandfather is doing, but, Dr. Woodward said, he's keeping the boy at a distance for now.

That may change when he turns 5—as Dr. Woodward has a beekeeping suit as a birthday present.

Dr. Woodward said he's glad he didn't allow a bee sting 60 years ago to thwart what has become a hobby and is becoming a passion. He said he loves spending time outdoor working on his hives.

True, he occasionally is stung—about 12 times in the past year by his own count. But those bee stings, he said, are mostly his fault. He's been stung, for example, when he skipped smoking his hives to calm his bees during his inspections. He's also been stung when he chose not to wear gloves while doing his work and when he too quickly brushed off bees.

"If you're careful and calm, and take your time, things work out."



## HAVING ABABY IN A PANDEMIC

A Story Worth Telling

h the story Emmett Hall's parents can tell their son when he asks them about what was happening when he was born.

The request might come when their son receives a classroom assignment to interview someone about what it was like to live through COVID-19. Or, it may come during story time at bedtime.

And his parents—Brad and Ashley—will tell him. They'll tell Emmett, born in May, how his mother was 6½ months pregnant when they realized the pandemic would hit Omaha, and Nebraska, with full force. The Halls were in Nashville where Brad Hall, M.D., was interviewing at Vanderbilt for a fellowship in plastic surgery.

They returned home in a hurry and were forced to make family decisions that would affect the remainder of Ashley's pregnancy. "No one knew at that time how it (COVID-19) would affect pregnancies," Ashley recalled. "We were waiting for science to catch up with COVID-19 and provide answers."

CONT. PAGE 25







#### FROM PAGE 22

So the Halls made some difficult decisions. Brad, who was finishing his residency in general surgery at UNMC, and Ashley needed to stay apart—for safety's sake of everyone involved, but especially mother and unborn child. Brad would stay at his parents' home in Plattsmouth, his parents would move into their cabin in western Nebraska, and Ashley would stay at home with their two children—Brody, age 3, and Jocelyn, 1. Ashley's mother stayed with her to help care for the children.

"We were fortunate to have the help of our parents," Brad said. "Not sure what we would have done without them."

Following their return from Nashville, Ashley recalled, the remainder of her medical appointments were through telemedicine. She tried to limit time at medical clinics and being way from home, in general.

She realized she might give birth without Brad at her side. "On one hand, what if Brad can't be there. (He ended up being at Emmett's birth.) You put all those scenarios in your head."

Brad spent a couple months away from his family. They would FaceTime each evening to keep routines for their children in place and keep them familiar with their father. He would also stop by their home, but stay outside for distance conversations.

Still, he had time on his hands as his work shifts were one week on, one week off. So he built a treehouse at his parents' home that he knew his children would someday enjoy and also for the distraction of being able to build something.

During the pandemic, Ashley partnered with three friends—also the spouses of medical residents—to acquire personal protective equipment (gloves, masks, face shields, goggles and gowns), or PPEs, that could be used by hospitals and medical clinics.

And when it comes time to tell Emmett about his birth, the story—and the photos to accompany it—will be so much different than his siblings. "Everyone in the photos has masks on."

- BRAD HALL, M.D.

Their organization—Omaha C-19 PPE Response Effort—served as the middle man of sorts, locating PPE for area hospitals, clinics and physicians with shortages.

In the end, Ashley gave birth in the hospital. She had a repeat caesarean delivery. Her stay was brief. Instead of staying the normal three days following a C-section, Ashley went home within 30 hours.

"They gave me the green light to go, and I was gone."

In retrospect, the Halls realized they took a conservative approach to Ashley's pregnancy. Also in retrospect, the Halls realize they would take that same approach if they were to live through a pandemic again. Hopefully, they won't, they said.

And when it comes time to tell Emmett about his birth, the story—and the photos to accompany it—will be so much different than his siblings.

"Everyone in the photos has masks on," Brad said.

As for Emmett, his mother said, he has no idea what the first months of his life were like. "He just smiles and eats and sleeps."



The Hall File

Hometown North Platte

#### Undergraduate Degree

Midland University in chemistry and biology

**Medical Degree** University of Nebraska Medical Center

**Residency** UNMC in general surgery

#### Fellowship

Vanderbilt in plastic surgery (in 2021)

**Specialty**General surgery

Institution UNMC

#### **Hobbies**

Household projects and spending time with his children

**Family** See the story

#### Why He Joined MOMS

"I think it's important to form that community among medical professionals and I think that part is special." THE CONNECTION WITH COVID-19 AND HEALTH DISPARITIES

ade Kosoko-Lasaki, M.D., does not hesitate when she explains that COVID-19 does not discriminate.

She called COVID-19 the "great leveler. It does not care what you look like. It doesn't care how much money you have. It does not care your education level."

The pandemic has, however, accentuated disparities in health, a topic which she has studied for the past three decades, earning a Master's Degree in Public Health from Howard University and a fellowship from Johns Hopkins University.







The
Kosoko-Lasaki
File

Hometown Omaha

#### **Undergraduate Degree**

University of Ibadan, Ibadan, Nigeria

#### **Master's Degrees**

Creighton University in business administration; Howard University, Washington D.C., in public health

#### **Medical Degree**

University of Ibadan, Ibadan, Nigeria

#### Residency

Howard University, Washington, D.C., in ophthalmology

#### **Fellowships**

Johns Hopkins Medical Institution, the Wilmer Institute, Baltimore, Maryland in glaucoma; Johns Hopkins Medical Institutions, Baltimore in preventive ophthalmology

#### Title

Associate Vice Provost, Health Sciences Multicultural and Community Affairs

#### Institution

Creighton University

#### **Hobbies**

Traveling and cooking

#### **Family**

Husband, Gbolahan O. Lasaki, M.D.; six adult children (including one who is a physician)

#### Why She Joined MOMS

"When I came to Omaha, MOMS was introduced to me. I thought it was the right thing to do."

#### FROM PAGE 26

During the conversation about COVID-19, Dr. Kosoko-Lasaki, an ophthalmologist and a public health specialist, explained her interest in health disparities and how she first became aware of them. She first noticed when she started studying who was receiving surgery for glaucoma. She discovered that, even when comparing on an even financial playing field provided by Medicare, Caucasians received surgery for their glaucoma in disproportionate higher rates than African-Americans and Hispanics. "That got my attention." Glaucoma is the leading cause of blindness in blacks and Hispanics, she added.

When she arrived in Omaha in 2000, she realized that the area was underserved by physicians, dentists, pharmacists and others in the health care professions who are black or Hispanic. She also noticed that African-Americans and Hispanics suffered from high blood pressure, diabetes, cancer and cardiovascular disease at a disproportionately higher rate when compared to Caucasians.

Through grant funding, Dr. Kosoko-Lasaki, who has master's degrees in business administration (from Creighton University) and public health, took aim at increasing the number of minorities in the health care professions, starting with fourth graders and working up. The desired outcome, she said, is that emerging health care professionals often return to serve their own people in their practices. Studies show that this will reduce some of the elements of health disparities.

And supported by funding by the Centers for Disease Control, she also took aim at promoting exercise and health to African American residents in north Omaha and impacted an estimated 42,000 people through her work. The message: "With exercise we can reduce cardiovascular disease and its risk factors."

"Then came COVID," she said. COVID disproportionately affects and kills minorities, she added.

She initially noticed that, through April 2020, Douglas County did not track the racial distribution of those who tested positive. When the county began tracking, she said, blacks were noted to be 2 to 3 times more likely to be affected when compared to Caucasians. In comparison, she said, in the state of Kansas, the rate was seven times higher; in Washington D.C., it was six times higher.

"The question is 'Why is this happening?'" she asked.

The answer, Dr. Kosoko-Lasaki said, stems from what she calls structural racism. (The Aspen Institute Roundtable on Community Change defines the term as "a system in which public policies, institutional practices, cultural representations and other norms work in various, often reinforcing ways to perpetuate racial group inequality"...) The structural racism perpetuates disparities in housing (red lining), jobs, transportation, education and health, amongst other socio-cultural factors.

She also noted that high blood pressure, obesity, diabetes, cancer and cardiovascular disease are risk factors for COVID-19. She emphasized that economics, jobs and education are among the issues that are associated with health disparities.

Early statistics revealed disparities when it came to COVID-19 and race. In May 2020, 48 percent of positive cases in Douglas County were in the Hispanic communities—but the Hispanic population in the county is only about 14 percent. "That is a disparity," she said. Douglas County's African-American population is 11 percent, but the percent of cases in the same month for African-Americans was 19 percent.

"Why is this occurring?" she asked.

Measures taken in response to COVID-19, she said, haven't always kept everyone in the community in mind. Initially, the virus outbreaks were in more temperate zones, and it was felt that hot weather and dark pigment seemed to thwart COVID-19. As this theory was disproven, the risk factors became identified as close exposure to others, at work or home. Also, the poor health status of the minority population has a lot to contribute to the high numbers.

Dr. Kosoko-Lasaki noted the risk for those with six or seven people living in a

"It brings us all back

to action to truly care

for our 'brothers and

sisters.' What affects

one, affects all of us."

- SADE KOSOKO-LASAKI, M.D.

small apartment may be greater than those living in larger homes with fewer people. When school is conducted remotely, she said, how can youngsters, study in crowded close quarters? And when school

is conducted online, she added, some youngsters do not receive the breakfasts and lunches, which could be the only hot meal in the day that they would normally receive at school.

"You're not thinking about everyone when all these policies are being made—just this is the right thing to do." And

it's the right thing to do for everyone at risk of dying from this devastating disease, she said.

The solution for addressing health disparities is education, she said. "People need to know who gets it and who dies from it." Creighton University, Center for Promoting Health and Health Equity (CPHHE), a community academic partnership that Dr. Kosoko-Lasaki co-founded and co-directs, has recently been awarded a \$250,000 grant to provide education to the minorities in Douglas County through

community lay advocates/ambassadors, to help to reduce the spread of COVID-19 in the community.

She added: "It brings us all back to action to truly care for our 'brothers and sis-

ters.' What affects one, affects all of us."

Dr. Kosoko-Lasaki said COVID-19 does not just affect a person's physical health, it also affects their psychological well-being. Individuals are lonely and scared of the virus. She said when visiting with her patients at the Omaha Veterans Administration, she takes time

to talk with them about their state of mind during this pandemic, as it has been documented that individuals have increased mental health problems. She encourages other doctors to take a holistical approach to treating their patients, no matter what their specialty. "Your patient may not have anyone else listening to the totality of their problems."

Physicians who treat about 20 patients a day often find they have little time to talk to their patients than to treat what ails each. "We preach it. We say it, but do we really have enough time to talk to our patients about their socio-cultural issues? But we have to figure out a way to do it."

If anything good has come from this pandemic, she said, is that COVID-19 has drawn further attention to the health disparities in the community and the nation—and has created a call to action.

And that call to action, she said, is that everyone deserves the same opportunity to survive.





## PREACHING THE IMPORTANCE OF IMMUNIZATIONS DURING COVID-19

hile Nebraska didn't see the drop in immunization rates that other states experienced during the initial months of COVID-19, the decrease still was significant enough for pediatricians to notice and take action, the state president of the American Academy of Pediatricians said.

"In general, Nebraska does very well with immunizations. The Midwest tends to do better than the Coasts," said Melissa St. Germain, M.D., President of the Nebraska Chapter of the American Academy of Pediatrics and vice president and medical director of Children's Physicians and Children's Urgent Care.

Still, the drop was troubling to pediatricians in the state, she said. The Nebraska AAP chapter was part of a national social media campaign—#CallYourPediatrician—that appeared to resonate with the public, Dr. St. Germain said. (The campaign aimed to reach parents on several social media platforms with timely reminders that going to the pediatrician, even during COVID-19, was important and safe.)

Nebraska's rates in May, for example, saw a 9.6 percent drop in immunizations for children age 2 and under when compared to the same month during the previous year. The decrease was 30 percent for children ages 2 to 7, and 35 percent for children 7 to 17.

Since then, the state's immunization rates have improved—According to a Nebraska DHHS press release on Aug. 12, 2020, compared to rates from January to June 2019, Nebraska immunizations for the same time frame in 2020 are down almost 6% for children under 2, 27% percent for children ages 2 to 7 and 30% for youth ages 7 to 17.

Dr. St. Germain said pediatricians in the state saw dramatic drops beginning in March when its residents started staying home. "There was a lot of fear. Parents were fearful of bringing their kids into a health care setting just because they were fearful of leaving home in general."

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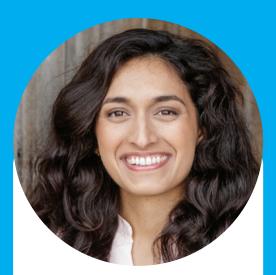
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#### **FROM PAGE 31**

Beginning in June, Dr. St. Germain said, she and her peers started noticing that parents were returning with their children for clinic visits, including immunizations. The weeks leading up to the start of school, she said, pediatricians were as busy as they were in previous years during late summer.

Physicians Bulletin • September/October 2020

Now, it's time to catch up, she said.

Of most concern, she said, are children who missed (or are behind) with their immunizations for pertussis and measles. "Those are infections we still see in the state. Whooping cough, we see every winter. Babies behind on their measles vaccinations are at high risk. If we see one case, we're going to see a lot."

Health disparities brought to light with minorities through COVID-19 are consistent with immunizations, she said. Economics are just one reason. Of special concern, she said, are the children of undocumented immigrants. "Parents are afraid to access health care," she said. "Our job is to make sure every child has access to vaccines and the health care they need."

"Parents are afraid to

job is to make sure

to vaccines and the

access health care. Our

every child has access

health care they need."

Dr. St. Germain said some discussion emerged during the early months of COVID-19 to create alternate locations for parents to have their children immunized. Her response: - MELISSA ST. GERMAIN, M.D. "We are still working

as hard as we can to get kids vaccinated. We rely on specialists to help spread the word that the best place for kids to get their vaccines is in their medical home."

Health care providers and the institutions where they treat children are doing their part to keep kids safe, she said, starting with screening for COVID symptoms at the clinic door.

Some institutions—including Children's are taking such measures as having parents and their children use one entrance for well visits and another for sick visits. They also alternate times and days when their see sick patients versus well patients. Children's Physicians took another step using one clinic location solely for well visits and another for sick visits. There are other clinics conducting COVID screenings in outside areas.

Although Nebraska experienced drops in immunization rates, Dr. St. Germain said, these changes were more dramatic in other states, especially those on the West Coast. "In our area, our patients have trust in us," she said. "When we recommend vaccines, most people will follow."

In August, The U.S. Department of Health and Human Services issued an amendment to the Declaration under the Public Readiness and Emergency Preparedness Act (PREP Act) that would allow statelicensed pharmacists (and interns under

> certain guidelines) to order and administer vaccines to children ages 3 to 18.

> Dr. St. Germain said the AAP issued a strongly worded statement against this directive and is actively petitioning HHS to repeal this

decision. "We feel immunizations should be delivered in the medical home, and worry that children will not get the preventive care they need if vaccines are given this way."

She also discussed the impact of herd immunity. "Particularly with extremely infectious diseases like measles, we've seen immunization rates drop below herd immunity levels in several states. This led to the measles epidemics in Washington, New York, and Michigan in 2019."

"We can't afford to let that happen in Nebraska." ()



St. Germain File

**Hometown** Omaha

#### **Undergraduate Degree**

University of Nebraska-Lincoln in psychology

#### **Medical Degree**

University of Nebraska Medical Center

#### Residency

Children's-Creighton-Nebraska Universities Health Foundation in pediatrics

#### Specialty **Pediatrics**

#### Title

Vice president and medical director

#### Institution

Children's Physicians and Children's Urgent Care

#### **Hobbies**

Hiking, yoga

#### Family

Husband Tom; three children

#### Why She **Joined MOMS**

"I joined for the increased opportunity to collaborate with MOMS and the American Academy of Pediatrics."

## MEMBER NEWS



#### DR. LIU BEGINS TERM AS ADMSEP PRESIDENT

oward Liu, M.D., has begun his one-year term as president of the Association of Directors of Medical Student Education in Psychiatry (ADMSEP). This national group consists of leaders of psychiatric education for first- to fourth-year medical students.

Last year, Dr. Liu was the president-elect of ADMSEP after previously being the organization's treasurer and secretary/news-letter editor.

As president, Dr. Liu said he has three key goals for his tenure:

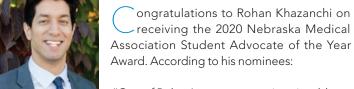
"First, the organization will rapidly adapt to COVID-19 and support its members through virtual events if we are unable to have a live meeting this year. Technology in the spirit of free open access medical education is built into the DNA of ADMSEP.

"Second, I want to be proactive in addressing the culture of medical education as we are launching a Diversity Equity Inclusion and Antiracism task force. Its charge will be to ensure that educators have the resources to create a safe and positive learning environment for medical students.

"Finally, I want to strengthen the relationships that make our organization vital. Being proactive about mentoring and networking connections will ensure that new educators have access to diverse leaders in psychiatry education."

Dr. Liu started with ADMSEP 10 years ago when he became clerkship director for the UNMC Department of Psychiatry. He also has previously served as director of the Behavioral Health Education Center of Nebraska and assistant vice chancellor for faculty development at UNMC. He was named chair of the UNMC Department of Psychiatry in January 2019 and became a tenured professor of psychiatry this year.

#### ROHAN KHAZANCHI AWARDED NMA STUDENT ADVOCATE OF THE YEAR



"One of Rohan's greatest passions is addressing structural inequities in society, particularly for people of color. His initiatives have garnered national attention. ... As a medical student himself, he is already beginning to shape conversations and moving the needle at the national level by launching grassroots initiatives locally."

"Rohan served as the Community Outreach Coordinator for UNMC CoRe. Through his role, he facilitated the distribution of over 60,000 units of PPE. He has linked national organizations to UNMC (i.e. Get Us PPE) to fly in thousands of N95 & KN95 masks to the Omaha area. His commitment to public health brought about the distribution of edu-

cational materials to OPS student families receiving UNMC CoRe's community sewn masks."

Mr. Khazanchi is a fourth-year medical student at the University of Nebraska Medical Center in the enhanced medical education track focused on comprehensive HIV care. He received his undergraduate at Washington University in St. Louis in neuroscience biology and his master's degree in public health at the University of Minnesota.

Other honors include the UNMC Internal Medicine Medical Student Research Award, the U.S. Public Health Services National Excellence in Public Health Award, Alpha Omega Alpha Honor Society, UNMC Gold Humanism Honor Society, and AMA Student Mentor of the Year. He has been active with the UNMC Medical Student Chapter as the AMA HOD Region 2 Delegation Chair, AMA Region 2 Delegate, UNMC Chapter Delegate, and Co-founder and co-leader of the Nebraska Health Policy Network cohort program.

#### DR. NOHNER NAMED NMA PHYSICIAN OF THE YEAR



"Dr. Nohner has an extensive and longstanding history of dedication to organized medicine dating all the way

back to his time as a young physician where he attended AMA meetings serving as Delegate to the YPS from Nebraska. His leadership continued through service on multiple local and state committees throughout MOMS and the NMA as well as the NAFP. In each of these roles, Dr. Nohner has provided strong leadership and a dedication to his profession and to our patients. There is very little in organized medicine in which Dr. Nohner has not been engaged."

"One last thing that makes Dr. Nohner stand out is his willingness, no insistence, on partnering with other organizations and members of the healthcare team to improve care for populations. While still focused on ensuring the strength of the physician role in the delivery of the care, his primary focus has always been on the patient. For example, his advocacy would extend beyond physician reimbursement through Medicare and Medicaid to also include critical health care resources such as home health or respite care are also reimbursed. I believe that his focus and dedication to improving access to care will define his legacy and his career."

Dr. Nohner graduated from the Creighton School of Medicine where he also completed his family medicine residency. He

established a solo practice that grew into a small group and later became employed with Alegent/CHI Health. He obtained his MBA and worked with UniNet until 2017 when he left clinical medicine to become CMO at United HealthCare. He recently moved from Omaha to Lansing, Michigan, to be closer to family and returned to clinical practice with the Sparrow Medical Group.

Dr. Nohner has held several different board, committee, and administrative positions within these health systems. Among holding other leadership roles, he is past president of both the Metro Omaha Medical Society and the Nebraska Medical Association and represented Nebraska at the AMA for several years.



#### DR. MCVEA - PRESENTED NMA DISTINGUISHED SERVICE TO MEDICINE AWARD

ris McVea, M.D., received the Nebraska Medical Association Distinguished Service to Medicine Award at the organization's annual meeting. Her nomination stated in reference to Dr. McVea:

"Is a widely recognized leader whose accomplishments in teaching, public health, research, clinical care, directorship, and advocacy were already impressive before her efforts in the COVID-19 pandemic. Dr. McVea has been a voice for the underserved for decades and has been a crucial part of OneWorld's efforts to provide and expand access for underserved patients in Nebraska and Iowa, leading a critical safety net organization. This award submission, quite literally, does not provide adequate text space to appropriately describe her impact."

Dr. McVea completed her undergraduate degree at Stanford University, medical school at UNMC, and residency at University of North Carolina - Chapel Hill with an emphasis in internal medicine and pediatrics. After residency, she obtained her Master's Degree in public health at University of North Carolina. Drawn by the mission of OneWorld Community Health Centers's mission to serve the underprivileged, combined with her desire to work

in a cross-cultural setting, she began volunteering as a provider, later becoming the medical director in 1997. In her current role as Chief Medical Officer, Dr. McVea has strived to improve the quality of care provided to patients in the health center and thus, not only contributed to, but improved the health of the community. A leader in the national movement to eliminate health disparities, Dr. McVea led HRSA's Health Disparities Collaborative efforts at the health center and continues to champion the PDSA (Plan, Do, Study, Act) model of change to improve health care outcomes. Her work has made the health center's patient outcomes stand among the best in the nation with record immunization rates and numbers and percent of patients with chronic disease such as diabetes, hypertension, asthma, and depression in control.

Dr. McVea currently serves with the Metro Omaha Medical Society on the Board of Directors and as chair of the Public Health Committee. She also serves as a graduate faculty member at the University of Nebraska Graduate College. She holds a courtesy appointment to the Department of Pediatrics at UNMC, a courtesy clinical instructor appointment at Creighton University and an appointment as an associate professor at the UNMC Department of Family Medicine.



#### DR. FABER RECEIVED COPIC HUMANITARIAN AWARD

ongratulations to Donna Faber, M.D., the awardee of the 2020 Nebraska COPIC Humanitarian Award. This award was established in 2001 in honor of former COPIC board member, Harold "Hal" E. Williamson to recognize a physician going above the scope of their

practice to volunteer in the community and provides a \$10,000 grant to be given to the health-related nonprofit of the recipient's choice.

In addition to the responsibilities at her busy practice, Dr. Faber has mentored new immigrant families and currently coordinates a weekly food bank for patients in need. Recently, she has worked

to expand access to employees whose spouses/families have lost hours or work due to the COVID-19 pandemic.

She is also a founding and longstanding member of OneWorld Community Health Centers's Rainbow Committee LGBTQ+ taskforce and an active advocate for sexual and gender minorities.

Dr. Faber's \$10,000 grant will go to OneWorld Community Health Centers in Omaha in honor of this recognition.

Dr. Faber is a member of Metro Omaha Medical Society Board of Directors.



## BEHAVIORAL HEALTH CARE AVALABLE AT ALL BT PEDIATRICS CLINICS

oys Town outpatient child and adolescent psychiatry, and behavioral health counseling services are now in all Boys Town Pediatrics clinics in Omaha.

Mental and emotional health has been ranked one of the top health concerns among children and teens in the Omaha metropolitan area, according to the Child and Adolescent Community Health Needs Assessment, a study sponsored by Boys Town National Research Hospital, Children's Hospital and Building Bright Futures.

"The need for mental health care for children continues to grow," said Jason Bruce, M.D., associate director of Boys Town primary care and pediatrician at Boys Town Pediatrics. "We have embedded psychiatry and counseling services into our primary pediatric clinics to provide greater access to this needed care, and to provide a team approach to mental, social and emotional care for our patients and their families."

During a medical visit or examination, a parent may reach out for behavioral health support or a child may show signs of mental health struggles. Having counselors and child psychiatrists in the same building with our pediatricians helps us better coordinate and accommodate the additional care that some of our patient families need. It also provides a resource for pediatricians if they have concerns about a patient and when to refer to a behavioral or mental health provider.

Boys Town Behavioral Health provides diagnostic and counseling services for children with ADHD, school problems, anxiety, anger management challenges, depression, phobias, peer relationship challenges, habits, sleep problems, eating disorders, neurodevelopmental delays and spectrum disorders. Child and Adolescent Psychiatry provides diagnostic services for the above, in addition to individualized treatment plans which may include medication management.



### DR. TIERNEY NAMED CHAIR OF DEPARTMENT OF CLINICAL RESEARCH

reighton University School of Medicine has named Maureen Tierney, M.D., chair of the Department of Clinical Research, assistant dean for clinical research and public health, and associate professor of medicine. In addition, Dr. Tierney will serve as medical director of clinical research at CHI Health.

Under her guidance, the Department of Clinical Research will facilitate the process of conducting clinical research from inception through completion, including concept review, trial feasibility and design, funding acquisition, statistical review and publication. The ultimate goal is scientific discovery to facilitate prevention, diagnosis and treatment of disease and to improve health care, including health care equity.

Her research interests include public health, medical ethics, antimicrobial resistance, and the epidemiology of COVID-19 and ways to reduce its transmission.

Prior to joining Creighton, Dr. Tierney held academic appointments at Harvard Medical School and Cornell University Medical College. She spent several years as a senior medical reviewer at the FDA and later the head of the Healthcare Associated Infectious and Antimicrobial Resistance Program at Nebraska DHHS. She was recently named the inaugural awardee of the McKnight Prize for Healthcare Outbreak Heroes.

At Nebraska DHHS, she and her team created an antimicrobial resistance task force, developed a real-time state antibiogram and established a containment program for a multidrug resistant organisms (MDROs). From February through May 2020, she authored and hosted frequent public health and clinical COVID-19 update webinars for the Nebraska medical community.

She holds certification from the American Board of Internal Medicine with a subspecialty of infectious disease. She earned her Doctor of Medicine degree from Cornell University Medical College and a master of science in health service administration, Kellogg Program for Research Training in clinical effectiveness from Harvard School of Public Health.



#### NEW PRESIDENT AND CEO HAS DEVOTED CAREER TO PEDIATRIC HEALTH CARE

handa Chacón is Children's Hospital & Medical Center's new president and chief executive officer.

Chacón has devoted her career to pediatric health care, focused on ensuring patients receive safe, high quality, family-centered care, while strengthening organizations and growing programs of excellence. She comes to Children's from Arkansas Children's, where she had served as executive vice president and system chief operating officer since 2016. She oversaw the system operations of two hospital campuses, clinical services, human resources and support services. Prior to leading in Arkansas, she served as the president for Texas Children's Hospital West Campus, Houston's first community hospital designed exclusively for children. Chacón spent 14 years at Texas Children's Hospital serving in progressive leadership roles, including ambulatory operations, Heart Center, Fetal Center, Women's Services and Pharmacy.

"We are confident that Chanda has the strong leadership acumen, clinical experience and character needed to lead Children's into its next chapter and benefit the children and families of our region," said Diane Duren, chair of Children's Board of Directors and chair of the CEO search committee. "She has a well-established track record of dedicated service and commitment to the health of children and the health of entire communities, which perfectly aligns with Children's mission: to improve the life of every child."

"I am deeply grateful for the opportunity to work alongside Children's highly skilled, respected team to continue to elevate pediatric care, advocacy, research and education in the region and beyond," Chacón said.

Chacón earned undergraduate degrees in biology and Spanish from Vanderbilt University and a master's degree in public health management from Yale University. She is a Fellow in the American College of Health Care Executives.





#### HOSPITALS RECOGNIZED FOR STROKE, CARDIAC CARE

ethodist Hospital and Methodist Jennie Edmundson Hospital were recently recognized for their quality stroke and cardiac care, earning high distinction among a number of prestigious hospitals nationwide.

Methodist Hospital was recognized with the American Heart Association's Mission: Lifeline® Silver Receiving Quality Achievement Award. It also received the American Heart Association/ American Stroke Association's Get With The Guidelines®-Stroke Gold Plus Quality Achievement Award.

Additionally, Methodist Hospital received the American Heart Association/ American Stroke Association's Target: Stroke Honor Roll and Target: Type 2 Diabetes Honor Roll awards.

Methodist Jennie Edmundson Hospital received the Mission: Lifeline® Gold Receiving Quality Achievement Award by the American Heart Association for the treatment of patients who suffer severe heart attacks and the American Heart Association/American Stroke Association's Get With The Guidelines®-Stroke Silver Plus Quality Achievement Award.

The Mission: Lifeline program's goal is to reduce system barriers to prompt treatment for heart attacks, including the 911 call, EMS transport, hospital treatment and discharge. The initiative provides tools, training and other resources to support heart attack care by following protocols from the most recent evidence-based treatment guidelines.

Every year, more than 250,000 people experience an ST elevation myocardial infarction (STEMI), the deadliest type of heart attack, caused by a blockage of blood flow to the heart. To prevent death, it's critical to restore blood flow as quickly as possible, either by mechanically opening the blocked vessel or by providing clot-busting medication.



SERIOUS MEDICINE. EXTRAORDINARY CARE

#### ADULT PSYCHIATRIC EMERGENCY SERVICES OPENING THIS FALL

ne in every eight visits to an emergency department in the United States involves a patient with psychiatric or substance use issues. Many of these patients wait hours or even days for transfer to inpatient psychiatric facilities. And this problem is only getting worse.

"We've seen a huge increase in mental health and substance use visits to our emergency department over the past four years," says Howard Liu, M.D., chair of the UNMC Department of Psychiatry. "From 2015 to 2019, we saw nearly an 80% increase in people with a psychiatric crisis coming to our emergency department, and had more than 3,000 visits for this reason last year alone."

It's for this very reason that Nebraska Medicine plans to open a new Adult Psychiatric Emergency Services unit this fall to address these problems.

The unit itself will feature a calm, compassionate environment away from the main emergency department. The goal: to stabilize patients and swiftly refer them to community partners for appropriate treatment while avoiding unnecessary inpatient admissions.

The unit will be staffed by psychiatrists, advanced practice professionals, psychiatrically-trained nurses, psychiatric social workers and patient care technicians. Mental health patient advocates known as peer professionals have been engaged in the design of the unit and will be available to patients 8 hours per day, to maximize dignity and respect for patients and families.

The unit will also have an open observation area with a capacity for 12 moderate-risk patients. These could be people with suicidal thoughts, manic symptoms from bipolar disorder, or substance use withdrawal who aren't in danger of hurting themselves or others. Patients in this area could receive treatment such as crisis intervention, motivational interviewing, safety planning and discharge planning.



#### DR. SUH NAMED JOHN AND IRENE GRAETHER ENDOWED CHAIR

onny Suh, M.D., has been named the John & Irene Graether Endowed Chair in Pediatric Ophthalmology.

Dr. Suh is a professor in the UNMC Department of Ophthalmology and Visual Sciences and also serves as chief of pediatric ophthalmology and adult strabismus and director of fellowship at Children's Hospital & Medical Center.

"I am truly honored to be the John and Irene Graether Endowed Chair," Dr. Suh said. "John is one of the most innovative persons I have ever met."

John Graether, M.D., is known as a surgical innovator in the field of ophthalmic surgery and photography. He has invented several instruments and holds about a dozen patents on some of the instruments still used in ophthalmic surgery today, including the collar-button iris retractor, side port manipulator and pupil expander.

Dr. Suh is a proven innovator himself, holding several patents and having been named the 2017 Emerging Inventor at UNeMed's annual Research Innovation Awards Banquet.

"Dr. Graether has always had so much passion for the field of ophthalmology and his patients. He has developed surgical techniques and designed instruments to make eye surgeries safer, not only for adults but for pediatric patients as well," Dr. Suh said, "I owe the deepest gratitude to him for helping me to grow and mature as a pediatric ophthalmologist."

The Dr. John and Irene Graether Endowed Chair in Pediatric Ophthalmology is an academic title and future funding source that fully supports the innovative accomplishments of Dr. Suh as professor of ophthalmology at UNMC and chief of pediatric ophthalmology at Children's Hospital & Medical Center.



## APPLICATION FOR MEMBERSHIP



This application serves as my request for membership in the Metro Omaha Medical Society (MOMS) and the Nebraska Medical Association (NMA). I understand that my membership will not be activated until this application is approved by the MOMS Membership Committee and I have submitted my membership dues.

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Office Manager:	Office	e Mgr. Email:
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Omaha, NE 68114

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