

WPS Names Bob Keisling Psychiatrist of the Year

Citing Dr. Keisling's life long commitment to caring for the mental health of the poor and homeless in Washington, DC, his role in leading the provision of psychiatric care in the District of Columbia jail and his unflagging advocacy for improved mental health care with the District government, WPS Past President David Fram, MD presented Robert Keisling, MD with the 2006 Psychiatrist of the Year Award at the Society's annual banquet, November 3. The banquet held at the Italian Embassy brought together WPS members, APA leaders and candidates for office here for the APA Assembly Meeting. Hind Benjelloun, MD PGY-2 at George-

town received the Resident of the Year Award for her work with the DC Chapter and the resident's website. Montgomery County Executive Douglas Duncan was named Public

Servant of the Year. The late Wayne Fenton, MD, remembered for his lasting contributions to research and clinical practice was named the Sen. Paul and Mrs. Shelia Wellstone Mental Health Visionary Award winner. David Fram, MD received the WPS Immediate Past President's Award for his service to the Society. ■



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Friends, Colleagues Remember Wayne Fenton, MD

Tom McGlashan, MD presented this Eulogy at Dr. Fenton's funeral on September 7.



Wayne Fenton entered my life when he came to Chestnut Lodge Hospital in the mid-1980s. His arrival was one of the best things that ever happened to me. He came to Chestnut

Lodge in part drawn by a research follow-up study I had begun there. I

was excited because his arrival doubled the size of our research department. But I was also nervous, never having been a mentor, never having had a mentee. But I didn't have to worry for long. He was a natural. He didn't need much guidance. Before I knew it, the research department was producing more than double its prior output. In what seemed like no time a dozen papers emerged from the department and floated forth with almost uncontested peer review

blessings – a collection referred to occasionally as the Fenton series of the Chestnut Lodge Follow-up Study, each paper a solid contribution to our knowledge about the diagnosis and the course of schizophrenia and its manifestations over long periods of time.

Wayne repeated such bursts of creative research many times and across several domains such as developing psychosocial treatments for schizophrenia, introducing psychoactive drugs and drug research to Chestnut Lodge, including the first use of Clozapine in Maryland.

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The President's Column



By Richard Ratner, MD.

Twilight of the Perks?

Colleagues attending last spring's APA meeting in Toronto may have gotten a taste of things to come in psychiatry when they made the long and tortuous trek to the exhibition hall to check out new books, medications, and other products. To their surprise (certainly to mine), we discovered that changes in Canadian law now forbid the handing out by drug company representatives of any of the complimentary items, from pens and pads to umbrellas and the occasional digital clock, that ordinarily are in plentiful supply.

While this may have been a fluke because of the Canadian locale, there is an increasingly voluble minority of medical colleagues, including psychiatrists, who are pushing to eliminate all such items, as well as meals in restaurants or even sandwiches brought to our offices, permanently in this country as well. A group of physicians who call themselves No Free Lunch has organized to pursue just this goal, and at last count some of the most prestigious medical schools have signed on to the movement, including my estimable alma mater, the University of Pennsylvania. The APA Assembly has listened to those in our ranks concerned about "commercialization" and has, among other things, made available to annual meeting registrants for a few dollars extra a book bag that is free of the logo of whichever drug company is defraying the cost of this item for the rest of us.

The rationale for this movement is obvious: it reflects concern

about and is a response to what is felt to be the creeping intrusion of the medical industrial complex into the practice of medicine. Some of us don't want patients to think, from the pens and pads scattered around some of our offices, that we are creatures of the drug companies, and others of us object even to being called on by detail people, who are presumed to give us biased and self-serving information.

You may scoff, as I do, at the notion that any of the items given away by these companies would actually affect our prescribing practices or that anything a rep says will be taken at face value by any of us. Yet one of the chief evidences put forth by the No Free Lunch people is polling data among physicians themselves. Interestingly, while most physicians say that they are not influenced by drug reps or the perks that they hand out, a majority also say that they believe their colleagues are so influenced. This of course is interpreted as a projection and a more accurate indication of the respondent's own proclivities than his or her allegedly self-serving answer to the direct question.

While I fear it is getting more and more politically incorrect to do so, I strongly disagree with these assumptions and with the attempt totally to sanitize my practice of contact with drug reps and the trinkets they bring with them. Despite the above, I for one have come across only the very rare colleague that I felt was in the pocket of a drug company. And in no case can I recall anyone who I thought would be the slightest bit influenced by such pathetically minor giveaways as any of those mentioned above. I am currently detailed by reps from a number of different companies, most of whom have competing products on the market. They realize, as I do, that the visits, pads, pens, etc., etc., basically cancel each other out, since I am an equal opportunity pad and pen acceptor and use them regardless of logo (preferring, of course, the better writing pens). It is a bit like the

adversarial principle enshrined in our legal system: let each rep point out his or her products' strengths and the competition's weaknesses, and eventually something close to a complete picture begins to emerge.

On the other hand, reps will often save me time by bringing in a sandwich for lunch and giving me the latest skinny on their product while I eat. All the reps know, because I tell them, that if all else is equal, I am more likely to start a patient on medication for which I have samples in the office. This allows the patient to try the medication and not have to spend money, at least until it is clear that (s)he will not have a violent reaction to it at the very outset. Any colleague is free to refuse to see detail people and refuse all their gifts, but I guess I resent those folks' attempts to legislate or mandate this option out of existence for the rest of us, particularly based on the notion that we are either too dumb or mendacious to keep our patients' best interests foremost.

What is most bad about all of this, however, is that it deflects interest from real malfeasance, such as the manipulation of research data by so called thought leaders to make drug A or drug B look better than it really may be. We are only now beginning to absorb the recent findings of a major clinical trial, which suggests that there is no greater efficacy among the atypical antipsychotics than for the earlier generation medications. I don't want to be too reductionist here, and by now we all have our own experience with these medications, but I know that I have been listening for years to respected researchers in psychiatry telling me how much better these new medications are. Maybe that's where those concerned with the corrupting effects of drug money (real money in this case, not trinkets) need to look, and legislate. Please feel free to share your views about this issue. The listserv (wpsnet@list.wdcpysch.org) is an ideal forum for doing so. ■

Fenton from page 1

He became an expert in institutional care such that when Dexter Bul-
lard, Jr. passed on, it was natural
for Wayne to assume leadership of
Chestnut Lodge. While running the
hospital he was also – sort of on the
side – collaborating with Montgom-
ery County in a research project
testing alternatives to institutional
treatment. Such was the scope of his
pluralistic vision. The way he saw it
one thing never worked for every-
one. For some, an institution was
therapeutic, for others it was toxic.
The answers about what “works”
were not clear or simple, but Wayne
always tried his best to answer them,
to try out new ideas, to try.

I left Chestnut Lodge in 1990
to run the Yale Psychiatric Insti-
tute and I tried several times to get
Wayne to New Haven to continue
our collaboration. He had received
his training in psychiatry at Yale
and was always nostalgic about the
place, a relatively unusual charac-
teristic among professionals trained
there. But every time I called in ear-

nest his phone was off the hook. I
began to realize Wayne would never
leave Montgomery County. The clue
to that came when once I asked him
what was in the county that was so
great. He thought for a moment and
said “Hank Dietl’s.” For those who
are not locals, Hank Deitl’s is a biker
bar on the Rockville Pike. He took
me there. It was an interesting place,
but no more so than similar quasi-
counter culture beer shacks that are
scattered along Route 1 in southern
Connecticut. But this one was on
the Pike, the aorta of Montgomery
County, and that’s what made all the
difference. I raised my bottle of beer
to him and said, “Wayne, you may
have been born in Albany, but you
are a Montgomery County redneck.”
He loved it.

When Chestnut Lodge closed in
the late ‘90s, how fortunate it was
for NIMH that it was located in
Montgomery County. Wayne only
had to move from West Montgom-
ery Avenue to Executive Boule-
vard – to the good fortune of Steve
Hyman and Tom Insel and com-

pany – and to the good fortune of
American psychiatry. Another of his
sustained bursts of creativity en-
sued. This time it was of orchestral
magnitude and complexity, weaving
together his well-honed talents in
research, clinical care, and admin-
istration. I cannot detail his many
initiatives because I was not there,
but I do know that his impact on the
extramural research field has been
substantial because I live and work
in that field and the number of times
I heard colleagues utter Wayne’s
name in awe, and occasionally in
vain, assured me that he was still in
Montgomery County and still larger
than Montgomery County.

An abiding legacy of Chestnut
Lodge was that Wayne loved see-
ing patients who were seriously
ill. He was tenaciously dedicated
to schizophrenia, from unraveling
the mystery of its origins to treat-
ing people with the disorder. It was
this dedication which unfortunately
is at the root of our gathering here
in shock and mourning. This time

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You have just been subpoenaed. *Do you know how to respond?*



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Banquet and CME Highlight Summer and Fall at WPS



155 members and guests enjoyed the elegance of the Italian Embassy at the 2006 Awards Banquet on November 3. Special thanks to Erminia Scarcella, MD for orchestrating this wonderful evening. Here Nancy Fenton accepts the 2006 Sen. Paul and Mrs. Shelia Wellstone Mental Health Visionary Award on behalf of her late husband, Wayne S. Fenton, MD. Joining Mrs. Fenton are (right) her father-in-law and Eliot Sorel, MD, chair of the WPS Wellstone Committee. Dr. Sorel and Thomas Insel, MD Director on NIMH recalled Dr. Fenton's extraordinary contributions to both research and patient care.



Hind Benjelloun, MD (right) received the WPS Resident of the Year Award at the Awards Banquet. Joining her is Constance Dunlap, MD, Chair of the DC Chapter who presented the award. Dr. Benjelloun was cited for her outstanding research and publications as a Georgetown resident and for her work on the DC Chapter Council and for helping create the WPS Residents' Village, the electronic neighborhood for area residents



APA President Pedro Ruiz, MD (left) gave the Banquet's keynote address and presented Montgomery County Executive Douglas Duncan with the APA's Jacob Javits Award of Special Recognition. Mr. Duncan also received the WPS Public Servant of the Year Award for his innovative work in improving mental health care in Montgomery County and for his courage in withdrawing from the Maryland gubernatorial campaign to seek treatment for depression.



Dr. Benjelloun, a native of Morocco is joined by family members at the Banquet, adding to its international flavor.



David Fram, MD (right) WPS President 2005-06 accepts the Immediate Past President's Award for Distinguished Service to WPS from his successor, Richard Ratner, MD.



NoVA Chapter Chair Eric Steckler, MD joins Leanne Dupon head of the Virginia Chapter of Out of the Darkness at the 2006 Walk-a-thon to raise money for research into suicide prevention



Residents are finding increasingly important roles in WPS. On September 21, MITs and others from the city's four programs were guests of WPS for a reception at McFadden's Saloon in Foggy Bottom. WPS President Richard Ratner, MD is in the middle to things at the reception. In foreground Samantha Shlakman, MD of Georgetown talks with Vernon Nathaniel, MD about her candidacy for APA Member in Training Trustee-Elect.



Residents, too, enjoyed the Awards Banquet.



District of Columbia Mayor-elect, Adrian Fenty took part in the July 26 Mayoral Candidates' Forum at the Martin Luther King, Jr. Memorial Library. WPS, Georgetown University Department of Psychiatry and the DC Psychological Association were the lead sponsors of this event.



DC Chapter Chair Constance Dunlap, MD addresses the audience at the Mayoral Candidates' Forum. Looking on is WPS member Steven Epstein, MD, Chair of the Georgetown Dept of Psychiatry who served as moderator for the forum.



Residents were very much in evidence at the CBT course on Nov. 11. With deep discounts in the course fee, WPS leaders were pleased to make it possible for residents from Howard, Georgetown, St. Elizabeths and George Washington to attend.



Residents enjoy themselves amidst the hub-bub at McFadden's on Sept 21. Our next residents' program is "Keys to Your Career" a day-long seminar on starting and building a psychiatric practice set for December 9 at the Key Bridge Marriott in Arlington.



CME is an important part of WPS's service to its members. Judith Beck, PhD of the Beck Institute of Cognitive Therapy in Philadelphia and Andrew Molchon, MD of Alexandria and past president of WPS presented a day-long CME symposium on Cognitive Behavioral Therapy on November 11. Also on the faculty were WPS member Anton Trinidad, MD, the course director who is director on inpatient psychiatric care at George Washington University Hospital and Stephen McDermott, MD of McLean Hospital in Boston. Elizabeth Morrison, MD serves as WPS CME Committee Chair.



Dr. Steckler tapes segment for To Your Health—with Dr. Russell Libby to be broadcast Sunday Jan. 7th Cox channel 10 at 1PM. The subject was "How the child psychiatrist helps the mental health of children".



WPS Women's Caucus continues to offer social and educational programs geared to the unique needs of female practitioners. Here Women's Caucus Program Chair, Antonia Baum, MD (right) poses with Kin Min Yuen, MD of Stanford University at the September 12 event at Marcel's at Washington Circle. Dr. Yuen discussed sleep disorders.



Peter Rabins, MD of Johns Hopkins (left) chats with Harold Eist, MD during a break in the September 16 CME program "The Interface of Psychiatric and Somatic Medicine" held at Suburban Hospital in Bethesda. Dr. Rabins presented on Mild Cognitive Impairment. Also presenting was James Simons, MD, Medical Director of the Women's Health and Research Consultants in Washington. Dr. Simons addressed issues of fertility and infertility.

ECP Mentors Needed!

By Catherine McCarthy, M.D.

WPS Early Career Psychiatrists are in need of new mentors. Being a mentor involves developing a peer-level relationship with an early career "mentee," providing practical advice on practice and business matters, introducing a mentee to the Washington psychiatric community, and supporting mentees as they begin their practices in the area. This is a pleasant, rewarding experience with little required and much to be gained.

For me, the mentor I found through the WPS provided me with invaluable insights, information, and contacts as I began my practice. I also developed a better sense of my own identity as a professional, with an experienced confidant who provided support and guidance. I found it a very welcoming introduction to the WPS as well, and I now find myself wanting to give back to others a little of what benefited me so very much.

The mentoring program is one of the most effective means by which we can expand membership in the Washington Psychiatric Society among young psychiatrists. Please help keep this critical program running strong. Currently, there are WPS Early Career Psychiatrists who have requested mentors, but we have too few mentors to go around.

By the way, do you know the origin of the word mentor? Yes, like many other words, we attribute this one to the Greeks. In Greek mythology, an elderly Mentor was a friend of Odysseus. When Odysseus left for the Trojan War he placed Mentor in charge of his son, Telemachus, and of his palace.

For more information, and to sign up to be a mentor, contact Catherine McCarthy M.D. at 703-288-3535, or cmccarthynd@verizon.net.

(Dr. McCarthy is an Early Career Representative to the WPS Board of Directors) ■

NEWS in Brief

Save the Date: January 25, 2007

Upcoming Early Psychiatrist Reception

By Carol Lynn Trippitelli, M.D., and Catherine McCarthy, M.D.

We are delighted to announce the upcoming early career psychiatrists' reception on January 25, 2007. (Location to be determined.) The title of the reception topic will be "Tax Law for Early Career Psychiatrists." We hope this event will mark the beginning of a regular program series that will focus on critical issues particularly relevant to early career psychiatrists and their practices.

We encourage all early career psychiatrists and their mentors to attend this pleasant evening, not

only for the opportunity to gain a better understanding of essential information that is the "bread and butter" of every private practitioner, but also for an evening of collegiality and good cheer among early psychiatrists and mentors. WPS Counsel Armin Kuder and other professionals with financial expertise will lead an absolutely essential discussion on how to manage taxes and finances in terms relevant to early career psychiatrists. Mark your calendars now! ■

Dear Editor,

Dr. Ratner states in his column in the September/October newsletter that the criterion that determines whether or not our organization of psychiatrists weighs in on a social issue is "considerable clinical relevance to the mental health of those individuals involved" (e.g. gay people who are unable to marry by law). I would like to suggest another important topic, since we seem to be casting about for them: traffic.

In urban and suburban areas, where most psychiatrists are located, excessive traffic has a major impact on quality of life in general and on mental health specifically (see *Soc Sci Med* 2004 July; 59(2): 405-14). Indeed, not an hour goes by when a patient does not miss valuable face-to-face time with me and my colleagues because he or she has been "stuck in traffic," "missed the turn-off" or "got in an accident." Many of these events take place due to poor design and implementation on the part of our public officials, not to mention bias in favor of rich developers. Clearly it is time for us as an organization to insist on policy changes by letting the planning boards and civil engineers know the

mental health consequences of their currently misguided policies, because we as psychiatric citizens are well-qualified to do so. While we're at it, could we please get the landscapers to trim the foliage around road signs more regularly so I will be able to read them?

Thank you very much.

Carol B. Perez, M.D. ■



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Residents' Village Provides Electronic Home for MITs

By Hind Benjelloun PGY 2
Georgetown

Coming soon to the WPS website at www.dcpsych.org is the *Residents' Village*, a place where MITs and medical students in the area can find information, guidance, and resources designed to unite, inform, and build a sense of community among residents and students at DC's four psychiatry programs. This new site will encourage residents to become active in APA politics and leadership, and lead residents toward opportunities to contribute to the metropolitan Washington mental health community.

The *Residents' Village* will offer a virtual meeting place for area residents and medical students to share ideas, opinions and thoughts about their experiences and offer resources and references to guide them through their training years. While designed primarily for residents in the DC area, the site has the potential to reach beyond our region to engage residents and others in programs across the nation.

The residents' planning team, Hind Benjelloun, MD, Joseph Gurala, MD, Anissa Maroof, MD, Scott Mayers, MD Enrico Suardi, MD, Lise Van Susteren, MD (advisor) and Eliot Sorel, MD (advisor) identified

five "houses" in the *Village*:

Practice/Insurance: To include information for residents interested in starting a private practice or moonlighting.

Academics/Training/Mentorship: Resources for day-to-day resident needs such as treatment guidelines, psychiatric contact information and a FAQ section.

Opportunities: Resident research, political, and leadership opportunities in the DC metro area and in the nation.

Artistic Expressions: An area dedicated to residents' artistic contributions.

Medical Students Interested in Psychiatry/Mentorship: A medical student friendly section to guide medical students toward psychiatry residencies.

The *Residents' Village* is currently under construction and will be unveiled in January 2007. The website is flexible and open to ideas and suggestions from all residents. It will be continuously modified as residents' needs are reassessed and examined. Residents who have ideas for the *Village* may share them on the newly created Washington DC Psychiatry Residents' Listserv at <http://health.groups.yahoo.com/group/dcpsychresidents/>. ■

Physicians for Human Rights Seeks Psychiatrists for Asylum Evaluations for DC

By Harvey Fernbach, MD

Physicians for Human Rights (PHR) operates an Asylum Network that assists people who are fleeing torture and other forms of persecution in their native countries, and who seek asylum in the United States. PHR's need for mental health professionals to provide evaluations is particularly acute in the metropolitan Washington area.

Through physical and psychological examinations by PHR health professional volunteers, the Asylum Network helps determine whether the injuries or trauma sustained by the applicants are consistent with their account of their experiences. As physicians, WPS members are qualified to conduct these evaluations and provide expert testimony to the courts. The time commitment is flexible; volunteers may see as few as one case per year. PHR will provide you with a CD-Manual to give you guidance in how the program works. Additionally you will receive specific background information for each case you accept.

For more information and to volunteer, contact Johanna Skrzypczyk at 617-301-4216 or by email at jskrzypczyk@phrusa.org. ■

Fenton from page 3

Wayne encountered the disorder at its typical debut in the brain and mind of a youth. This time, however, the disorder took two lives, not one. Wayne's name is now inscribed on the vertiginous wall of doctors who died at the hands of the disorder they were trying to treat. The patient's name is not likely to achieve the same outcome. He is alive, but what he has lost to disorder may well be the subject of a

lifetime of mourning. I know Wayne would regard this as the antithesis of everything he was trying to achieve, because we know that he never gave up the effort to understand and treat the sickest among us.

Nor should we ever give up. To finish, I would like to read a note Wayne's family received two days ago from one of Wayne's former patients. It shows what he showed many times – good things can happen, too.

To Doctor Fenton

Who helped me in my time of need and led me to the way of a happier life. To his loving wife and children who he loved dearly and to his love for the better of others. His memory will never be forgotten! To those who knew him you know how great a man he was. To those who didn't may you try to understand that this man was a hero to many.

Love, a patient ■

Contributions Welcomed for Legal Battle in Maryland Court

Fighting on behalf of patients and psychiatrists to ensure the confidentiality of patient records, Harold Eist, MD, who has won in four previous court appearances, must now appear in the Maryland appellate court to make the case for preserving patients' rights. In March the Circuit Court of Montgomery County ruled in Dr. Eist's favor; however, yet again, the Maryland Board of Physicians has appealed, this time to the Court of Special Appeals.

The Washington Psychiatric Society has again joined over 20 other professional and patient organizations to file an amicus curiae brief with the Court of Special Appeals. The heart of the brief restates our conviction that the confidentiality of the physician/patient relationship is the cornerstone of psychiatric care and that the Board of Physicians has violated this paramount principle in demanding the records (without their permission) of three patients in response to a third party complaint made in the heat of a divorce and custody battle.

As it has with previous briefs, the WPS Board of Directors asks our members to contribute voluntarily to the expense of this brief. Funds received over and above the cost of the WPS share of this expense will be used to defray Dr. Eist's legal costs, now approaching half a million dollars.

To contribute, please send your check payable to Washington Psychiatric Society to PO Box 55 Boyce, VA 22620. Please mark it "Confidentiality Fund." ■

Ed Kirby, MD Past President Succumbs

Edward C. Kirby, MD, DLFAPA, 78, president of the Washington Psychiatric Society 1978-79 and long-time member of the WPS Ethics Committee died on October 5 following chronic illness. He is survived by his wife Dorothy and children, Mark Kirby, Christian Kirby, Ina Herlitzka, Gwen Pollack Ruffner and Fred B. Pollack. Funeral services were conducted at Rankin Memorial Chapel on the campus of Howard University. Internment took place on November 2 at Arlington National Cemetery. A graduate of Howard University Medical School, Dr. Kirby was a member of WPS and the American Psychiatric Association for 44 years. Contributions in his memory may be made to Woodley House, Howard University Medical Class of 1956 or to Temple Micah. ■

New DC Regs Clarify Patient Confidentiality Protections

By Barry Landau, MD and Elizabeth Hersh, M.D.

A new regulation from the District of Columbia Insurance Commission clarifies the patient confidentiality protection that exists in the District of Columbia. The regulation results from a cooperative effort between the Medical Directors of Health Insurance Companies, mental health practitioners and the Insurance Commissioner, with Washington Psychiatric Society playing a major role.

The essentials of the regulation are contained on the form, entitled "Release of Mental Health Information for Outpatient Mental Health Treatment." (WPSNews July/August 2006) The form was developed to

be in compliance with the District of Columbia Mental Health Information Act of 1978, the drafting of which also saw WPS play a major role.

If you are a mental health practitioner working in Washington, DC, the form is to be used any time a third party payer requests information on your patients that goes beyond the billing information and/or diagnosis and/or CPT Code. The form is available on the WPS website www.dcpsych.org. Click on WPS News & Information, then click on WPS Newsletter, then click on July/August 2006 edition. The form is on page 6.

It is now the official policy of the District of Columbia Insurance Commission that all such additional information is to be requested and completed on the form. You will note that the patient's written permission is required. As practitioners, we are allowed to give only the information requested on this form, even with a patient's permission.

If a third party payer requires more information and your patient wishes to pursue insurance payments it is necessary to request an Independent Review. This is a confidential review of the client's mental health information by a mental health professional or professionals. Mental health information disclosed for the purpose of review shall not be disclosed to the third party payer.

If you have questions, please contact:
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barryjlandau@verizon.net
or
Elizabeth K. Hersh, MD
202-333-3835 Tel.
ekhersh@erols.com email
For internet Forms:
www.disb.dc.gov
click service, click industry forms, click release of mental health info. ■



DC Chapter Focused on Mission, Activism and Member Service

By Constance E. Dunlap, MD,
Chairperson, DC Chapter

With a well-attended business meeting and Louis Kopolow, MD's presentation on "The Neurobiology of Depression" at the Palm Restaurant, the DC Chapter of the WPS celebrated a year of renewed outreach to the Department of Mental Health, the city council, the mayor's office, local mental health advocates, medical students and psychiatry residents. The September 28th event was cosponsored by the National Medical Association which granted 1.5 CME credits for program. Commercial support was provided by Eli Lilly and Company.

Using the goals of the 2006 Strategic Planning Committee, the evening's speakers informed attendees of the tremendous energy devoted in the District of Columbia toward:

- (1) Advocating for patients;
- (2) Improving access and quality of psychiatric services;
- (3) Improving psychiatric education and training;
- (4) Facilitating collegial interaction among chapter members;
- (5) Fostering collaboration among those concerned with treatment of mental illness;
- (6) Showing leadership in the metro area e.g., local and national legislative and patient advocacy groups;
- (7) Collaborating with the APA and district branches; and
- (8) Providing opportunities for career satisfaction

As Chapter Chair, I along with Robert Keisling, MD reported to the near capacity audience on the Chapter's outreach to the Depart-

Continued on page 10

Office Space Available

Central Bethesda: Attractive office available. Ample parking and proximity to Metro. Ideal for psychiatrists or psychotherapists. For more information, contact Carol at 301-571-4661 or mosesc@stanleyresearch.org.

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Gaithersburg: Excellent opportunity to join well-established psychiatric group practice in Gaithersburg. FT/PT, Adult or Child Psychiatrist, Evaluations, Medication Management, Brief and Long Term Therapy. Fax resume to: (301) 869-7760

Montgomery County Department of Health and Human Services (DHHS), is anticipating the need to recruit and hire psychiatrists. The positions will be either contractual or salary. The positions vary. So will the required work hours. The need will likely range from 10 hours per week to a standard 40 hours work week. Some positions will conform with a traditional 8:30am to 5:00pm work day while others will require a more flexible schedule. Needs could be in the following areas: Adult outpatient, Children outpatient, Crisis center, Jail diversion Addiction outpatient, Addiction residential programs. If interested, please contact Roger Peele: Roger.Peele@MontgomeryCountyMD.gov, phone 240-777-3351, FAX 240-777-3307 or mail to Roger Peele, MD, DLFAPA, 401 Hungerford Dr, Room 456, Rockville MD 20850

Psychiatrist-Southern Maryland. Practice primarily inpatient with some outpatient. Competitive compensation w/benefits offered. Great community and schools. Located near the Chesapeake Bay and within a short drive to DC, and Balto. Send CV to fax 443-432-0208 or email drrecruitment@chesapeake.net ■

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ment of Mental Health (DMH), the mayor's office, and city council. This outreach effort was kicked off by the January 17, 2006 WPS letter to Mayor Anthony Williams citing "dangerous and deteriorating conditions in public sector mental health." After meetings between WPS and DMH, on June 8th WPS hosted a reception for Stephen Baron, Director of DMH. Mr. Baron was appointed by Mayor Williams on April 10th. In July Richard Ratner, MD submitted a letter to Councilmember David Catania commending Mr. Catania's efforts to address problems at St. Elizabeths Hospital. These problems were detailed in the May 23rd Department of Justice's summary report on its investigation of patients' rights at St. Elizabeths. On July 26th the WPS supported a mayoral candidates' town hall meeting, sponsored by Georgetown University Department of Psychiatry. Our presence at these events is part of our renewed effort to advocate for our patients and ourselves and to improve access and quality of psychiatric treatment.

Barry Landau, MD discussed the DC Mental Health Information Act, which WPS through the DC Chap-

ter initiated in 1978, and the new "Release of Mental Health Information for Outpatient Treatment" form which clarifies and limits information clinicians are permitted to disclose to insurance companies requesting information about treatment, e.g. requests for treatment plans. (See July/August WPS Newsletter at www.dcpsych.org for a copy of the form.) Dr. Landau with Elizabeth Hersh, MD chaired a coalition of mental health professionals that has met with the District's Insurance Commissioner and the CEOs of managed care organizations doing business in the city for nearly five years to work out a consensus on the information that can be captured by the MCOs.

Steven Lipsius, MD, who has devoted many years as treasurer, reviewed the chapter finances. Dr. Lipsius reported that Chapter revenue and reserves are strong.

Hind Benjelloun, MD, PGY II at Georgetown University Department of Psychiatry, reported the activities and plans of the Minority Outreach Program. This program has been funded by the American Psychiatric Foundation to reach out to under-represented minority medi-

cal students. This year's plan is to use the movie "Crash" to illustrate principles of psychodynamics in film and everyday life. Additionally, Dr. Benjelloun announced the formation of the Residents Village, a list serve connecting the area's four psychiatric residency programs, George Washington University, Georgetown University, Howard University, and St. Elizabeths Hospital.

Robert Keisling, MD, the DC Legislative Representative and longtime mental health advocate, described the jail diversion project. The project is a much needed service. It will make sure that persons with mental illnesses who come into contact with the District's criminal justice system get necessary and appropriate treatment rather than incarceration. Dr. Keisling told us that, beginning October 1, 2006, Unity Healthcare will assume responsibility for psychiatric treatment to inmates at the DC Jail.

The evening was capped off with an excellent update on recent developments in neuroscience with clinical applications by Dr. Kopolow, followed by hearty discussion.

Highlights of the past year's activities can be found at www.dcpsych.org. ■

