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PRESIDENT'S PAGE: The majority of physicians are now opting for employment, and most physicians trained today will expect to be employed. The ratio of employed physicians to those in private/solo practice will continue to rise. This concerns Dr. Miriam Anand as she worries about the continued deterioration of the physician voice. Page 6

PUBLIC HEALTH: Drug poisonings have become the leading cause of unintentional mortality in the United States, and opioids have been the class of drugs most frequently involved in the fatalities. Dr. John Middaugh proposes comprehensive action for this drug poisoning epidemic. Page 24

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EMPLOYMENT:

Dr. Anthony Yeung —
educating the next
generation of physicians
to be competitive in a new
era of healthcare. Page 18

**LEGAL – ANATOMY OF A BOARD COMPLAINT:** Chances are if you practice medicine long enough, you will have a board complaint filed against you at some point in your career. When you receive that letter, it will be a disturbing experience, and most likely a source of anxiety and anger. Dr. Steven Perlmutter, JD, provides his unique perspective on how physicians can handle that dreaded letter - if you ever receive one in the mail. Page 32

#### PROFESSIONAL DEVELOPMENT - PHYSICIANS CREATING THEIR FUTURE:

The transparency called for under the ACA will reveal a great deal of information, which provides impetus for fixing problems that need to be repaired. Dr. Howard Lang believes physicians in small and medium practices need to create their own future by coming together and sharing data and analytics so they can better coordinate care at lower costs. Page 38

**PERSONNEL – DOCUMENTATION, A LEGAL RX FOR A SUCCESSFUL EMPLOYMENT RELATIONSHIP:** The omission of proper employment documentation can lead to personnel disputes. Stacy Gabriel's article serves as a general guide on how and what to document in an employment setting. Page 42

## MCMS IS WORKING FOR YOU – NOT JUST ANY PHYSICIAN REFERRAL SERVICE WILL DO. CALL THE EXPERTS. CALL MCMS:

Did you know we have a FREE Physician Referral Service? It's a perk of membership! Learn more about the program, how you can update your information, or sign-up. Page 46

**VIEWPOINT – TRIVIA:** One of Dr. Rudi Kirschner's world-famous vignettes; samples from his "this and that" non-taxing trivia folder. Page 53

## Educating the Next Generation of Physicians to be Competitive in a New Era of Healthcare

Susan Parker

nthony T. Yeung, MD understands how to keep patient care his top priority as the tides are changing in the way that healthcare is delivered. Changes in medical technology, advancements that challenge previous "gold standards," and evolving "best practices" illustrate the ever-changing landscape in medicine.

Patients are demanding less invasive options, and payers want to control costs. The result is new quality initiatives, changes in delivery models, and the need for physician education on less invasive, more cost effective treatment options. The next generation of physicians will need this training to be competitive in the new era of healthcare or find employment to insulate themselves from having to deal with the ever demanding complexities of practicing

medicine. Innovation can keep physicians choosing to stay in private practice rather than becoming employees of hospitals or healthcare systems.

In this issue of *Round-up*, get to know Dr. Yeung; what motivated him to become a physician, his practice philosophy and treatment beliefs, and why he believes that physicians need to continue to band together as a collective voice by joining organizations such as the Maricopa County Medical Society (MCMS).

#### The beginning.

The impetus for Dr. Yeung to become a physician was a mentor in Tucson, **Dr. Jack Klein**, who helped Dr. Yeung's



family when they escaped from Communist China in 1949. It was serendipitous that his mother was born in the U.S. and had sisters who lived in Arizona.

With his mother's fortitude and her philosophy to "turn it around in one generation," Anthony Yeung decided to emulate Dr. Klein by becoming a physician so he too could use his knowledge and skills to help people.

His motivation to focus on minimally invasive spine surgery stemmed from Dr. Yeung's own experience caring for his mother after another surgeon did her back surgery, while he was still a resident. She was worse after her surgery. He thought there had to be a better way. So in the 1990s, Dr. Yeung took the concept of the knee scope

and brought it to the spine, using a transforaminal approach and visualized endoscopic instrumentation he pioneered allowing for a less invasive, equally effective approach for spine surgery.

Marrying laser technology and the endoscope, Dr. Yeung developed a FDA approved multi-channel spine endoscope that allows surgeons to visualize foraminal and intradiscal anatomy and selectively remove the degenerative and

extruded portions of a herniated nucleus contributing to back and leg pain.

The sleek 2.7 mm operating channel scope uses a keyhole incision to access the damaged disc, dilating rather than cutting muscle and tissue, resulting in less tissue destruction, no need for general anesthesia, and a quicker recovery. This procedure is used to treat herniated, protruded, extruded, or degenerative discs, and spinal stenosis in the lumbar spine.

"Endoscopic foraminal spine surgery offers the least invasive surgical solution to visualizing and treating the pain generators without burning any bridges for traditional more invasive procedures that have higher surgical morbidity," comments Dr. Yeung. Patients appreciate his philosophy to "refuse to fuse" as their initial surgical option.

**Dr. Kelly Hsu** describes him like this, "Dr. Anthony Yeung's professional success comes from being a true visionary with high goals, a unique ability to solve problems, and the determination to get the job done. He is a great leader because he always leads by example and persistently convinces those around him to dig a little deeper and reach a little farther. Dr. Anthony Yeung is famous for mentoring younger physicians and is generous with those who are making an honest effort to help themselves. He is a straight shooter who confidently speaks

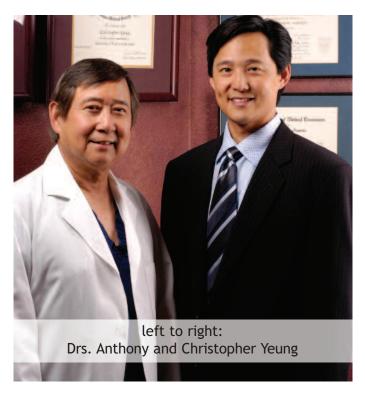
When asked his practice philosophy, Dr. Yeung says, "I am focused on what is best for my patients as opposed to what the payer will approve. I believe in physician autonomy and patient choice." — Susan Parker

the simple truth for the betterment of friends, colleagues, and patients."

#### Practice and treatment philosophy.

The art of practicing medicine has changed over the years; economic circumstances in the practice of medicine have forced physicians to work in environments where they practice their art, but resign to be controlled by the payers. Some even embrace it. But, in Dr. Yeung's opinion, medicine will always be an art based on science. "The





science guides us, but the art of medicine is what separates the good or superior from the average."

When asked his practice philosophy, Dr. Yeung says, "I am focused on what is best for my patients as opposed

to what the payer will approve. I believe in physician autonomy and patient choice." He believes economics, rather than patient satisfaction, guides payers and their paid consultants.

Dr. Yeung's treatment philosophy is to provide patients with what he would recommend for his own family, and he practices what he preaches. When he recently herniated a disc in his own back, Dr. Yeung had his son, **Christopher Yeung**, **MD**, perform the Yeung Endoscopic Spine Surgery on him, without hesitation. The surgery was a success.

# Educating the next generation of physicians through philanthropy.

Hospitals are once again buying physician practices, including practices owned by seasoned physicians who just don't want to deal with the business of practicing medicine anymore. In a private practice, innovation creates more options for physicians than selling to a hospital for survival.

By embracing innovation, physicians can remain in private practice by virtue of their performance. They can assemble a "dream team" which rises to the top 10% of their specialty in both expertise and delivery of medical or surgical care.

Resourceful physicians have the ability to remain independent, yet still contribute to patient care by bring-

ing innovation and collaboration to mainstream medicine. That is why Dr. Yeung decided to help the University of New Mexico (UNM) with his donation to create the Anthony T. and Eileen K. Yeung Center for Endoscopic Spine Surgery.

**Dr. Howard Yonas**, Chairman of the Department of Neurosurgery at UNM explained, "Because we have a very cohesive multi-disciplinary group in our spine program, it is clear that each part of the breadth of Dr. Yeung's work will be embraced by all members of the team." The multi-disciplinary team at UNM hopes to validate minimally invasive spinal surgery with prospective IRB approved comparison studies in an academic setting using strict IRB guidelines.





## Q & A with Dr. Anthony Yeung

#### Q: Why did you decide to become a physician?

A: I was always interested in the healing arts as I was influenced by and deeply grateful for a Physician in Tucson, Dr Jack Klein. Being a physician was the best way for me to emulate him by using my knowledge and skills to help others. It is an incredible feeling when that occurs on a regular basis, to hear from the people I was able to help years and decades later, telling me what my help meant to them.

## Q: What "personalizes" you as to how you promote the profession of medicine?

A: I believe in fighting for physician autonomy in order to facilitate patient choice and have never deviated from that position.

### Q: Why did you choose to start your own practice?

A: It is always difficult to get a group of surgeons with different skill sets, work ethics, and outlook on the direction of medicine to agree on the structure of their group practice. While I was grateful for the 10 years with my former group, I was growing apart from the group's direction and internal policies, and I felt it was time to adapt to the future direction of healthcare. That was minimally invasive spine, which none of my previous partners embraced in the 1980's.

# Q: What drove you to create the Anthony T. and Eileen K. Yeung Center for Endoscopic Spine Surgery at UNM?

A: It hit me one day that it would take forever for me to pass on my work without the help of a medical school and teaching institution. The Dean of my Alma Matter, the University of New Mexico, contacted me, then the Chief of Neurosurgery spoke to me about his vision to provide care to a mostly indigent population in New Mexico. His vision matched my own and was the motivation for me to get involved.

"Every patient who comes to us is evaluated by a multi-disciplinary team," said **Dr. J. Fred Harrington**, Assistant Professor of Neurosurgery and Director of the new endoscopic spine surgery center. The team includes orthopedic spine surgeons, neurosurgeons, physiatrists, internal medicine, family practice, psychology, pharmacy, occupational therapy, and chiropractic medicine.

Past President of MCMS, **Dr. Nathan Laufer** added, "Tony is a superb physician, innovator, and entrepreneur who has never forgotten his humble roots. He is a man of passion and conviction, but most importantly, has shared his success with those less fortunate and with his alma mater."

Additionally, Dr. Yeung hosts and trains surgeons who travel from around the world to Phoenix to attend his quarterly meetings and cadaver labs. Most months, Dr. Yeung also travels to other countries to train spine surgeons so all patients globally have access to this procedure. In fact, he and **Dr. Sandford Roth**, a retired Rheumatologist and MCMS member since 1966, have both spent time in China teaching at the Beijing Medical School, which is how their friendship began.

Dr. Roth said, "It was a lifetime experience for me to become a mentor to Professor Wu, an orthopedic total joint surgeon specializing in joint replacement, and have the opportunity to work with Dr. Tony Yeung, who also served as a Visiting Professor. Dr. Yeung was just presented a Lifetime Achievement Award by the Asian Pacific Community in Action (APCA) at their annual fundraiser in May, as he continues this legacy relationship between Phoenix and China." (Editor note: please see page 23 for photos of the APCA event).

#### The importance of organized medicine.

Dr. Yeung, an active member of the MCMS since 1978 and President in 1995, strongly believes it is important that physicians get involved in professional physician organizations such as the MCMS.

"The MCMS is the only organization where independent physicians can unite and have a collective voice. Physicians should become more collegial and support the common cause as a group," said Dr. Yeung. He notes, "During my presidency, I focused on patient autonomy and patient choice. That is being taken away from physicians by payers hoping to direct us by controlling reimbursement. In fact, it was when private practice physicians banded together to protect the interests of physicians and their patients that the MCMS was formed. We should continue that legacy by uniting as a common voice to protect the physician-patient relationship, and ensure patients have access to innovative treatments with the best outcomes."

Dr. Yeung believes the Society is needed now more than ever, as autonomy and private practice are changing rapidly, where doctors will no longer be able to treat patients individually, but as population and disease entities.

He concludes, "Clearly, changes in healthcare will continue, but we must find ways to keep patient care the top priority, protect physician autonomy, and protect the physician-patient relationship. We do not want to treat patients with calculators. For new physicians in a cost-conscious medical environment, this is more critical now than ever." ru

Photos courtesy of Desert Institute for Spine Care (DISC) and Paulson Photo/Graphic. To learn more about DISC visit http://www.sciatica.com. Mike Paulson offers MCMS members a 10% discount. He can be reached at 602-230-1550 or photo@paulson.com.

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