



GEORGIA OSTEOPATHIC  
MEDICAL ASSOCIATION  
1902

## GOMA News & Updates

### Volume 46, April 2024

### National Osteopathic Medicine Week Highlighted by Declaration by Georgia Gov. Kemp

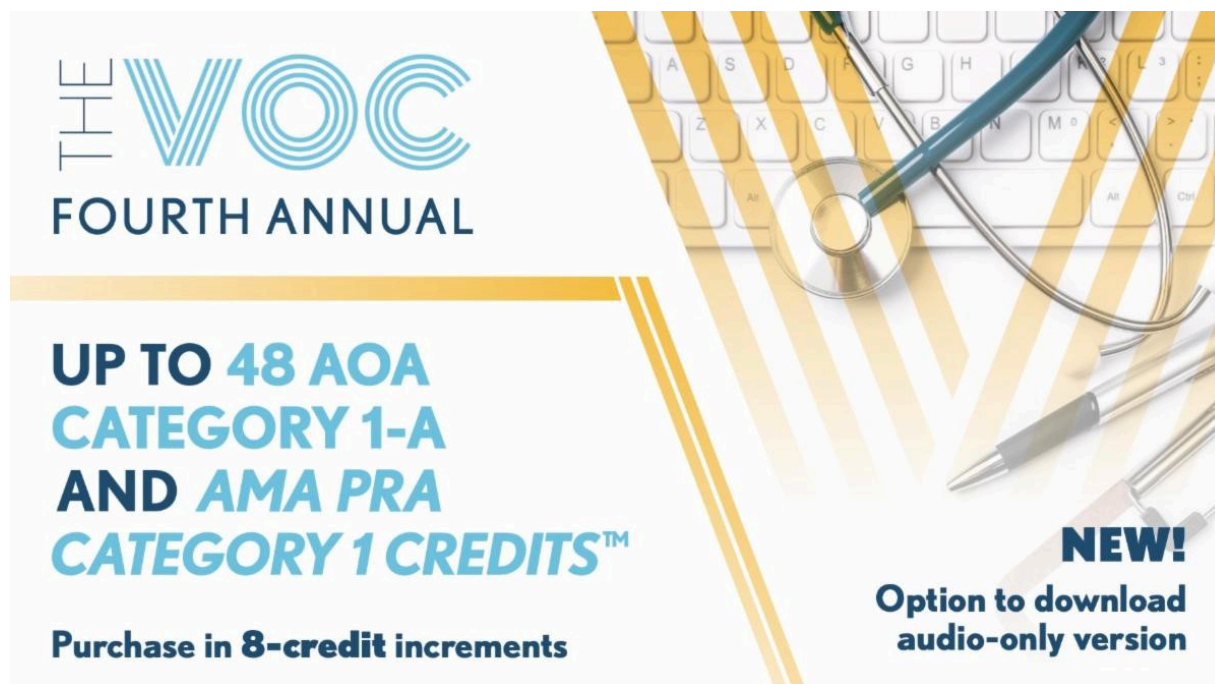


Georgia Osteopathic Medical Association visited with Governor Brian Kemp in his office at the Georgia Capitol. Dr. Kemp signed a declaration that National Osteopathic Medicine Week will be

observed starting on Monday April 15. He also spoke to the GOMA representatives and introduced his wife Marty to the gathering. The meeting was concluded with a photo of the group.

(Left - Right): William Lagaly, DO (Wound Care specialist in Athens & Vice-President of GOMA); Betsy Hilt (Executive Director of GOMA); Gregory Harris, DO (oncologist in Rome & President-Elect of GOMA); Karen Turner, DO (FP in Savannah & District 4 Sec/Treasurer); Sonbol Shahid-Salles, DO (ER doc in Rome & President of GOMA); Gov. Kemp; Marty Kemp; Bill Bostock, DO (FP faculty at NE Georgia Med Ctr & Chairman of Georgia Composite Board of Medical Examiners); Brittany Woods, DO (hospitalist in Rome & Ex-Officio Advisor to the Board); Michael Baron, DO (FP in St Mtn & editor of GOMA newsletter);

GOMA will be having doctors visiting the campuses of PCOM Georgia and PCOM South Georgia during National Osteopathic Medicine Week to help connect the osteopathic medical students to the organization that represents the osteopathic profession around the state.



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**It's Not Too Late to Take Advantage of VOC offering  
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Your GOMA membership can save you between \$70 and \$350 depending on how many CME credits you select from the 2024 Virtual Osteopathic Conference (VOC).

This conference offers up to 48 CME credits of AOA Category 1-A Credit and AMA PRA Category 1 Credit™ in a flexible format. One can attend on-demand anytime between now and June 30, 2024. This offers you the maximum flexibility in what CME you take and when you take it.

The end of this year is the end of the AOA's three year cycle, so [check out the schedule and register](#).

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**DO Day** 

**Distinctive in Healthcare  
Advocacy and Leadership**

## **AOA Holds DO Day Virtually and/or In-Person in Washington, DC**

### **DO Day Congressional Meetings: 2024 Advocacy Issues**

The deadline is quickly approaching to sign-up for DO Day 2024's in-person briefings and congressional meetings on Wednesday, April 17, and Thursday, April 18, so be sure to register today!

DO Day 2024 is your opportunity to use your voice to represent the profession. The osteopathic community has a valuable opportunity to discuss issues that affect you and your capacity to care for patients with legislators during DO Day. This year, the AOA will be speaking out on three issues that directly affect osteopathic physicians, their patients, and osteopathic medical students' career decisions. These issues are:

- Protecting patient access to care and physician practices by advocating for positive updates to Medicare physician payment through the Strengthening Medicare for Patients and Providers Act (H.R. 2474).

- Creating a safe working environment for physicians and other healthcare workers by advocating for the Safety From Violence for Healthcare Employees (SAVE) Act (H.R. 2584/S. 2768).
- Alleviating financial burdens of student debt by encouraging Congress to support the REDI Act (S.704/H.R.1202).

The deadline to register for the in-person congressional meetings ends Friday, March 29.

Unable to make it in person? Register for the virtual-only-option. The virtual conference content will be available for viewing through June 14 to provide you with the flexibility to watch sessions at your convenience. Take advantage of the opportunity to enhance your leadership and advocacy skills while earning CME credit.

Below are the options available for registration:

**Option #1: Virtual Conference & In-Person Congressional Meetings\***  
Space is limited for the in-person congressional meetings and registration for this option closes on March 29, 2024. This option includes virtual conference access through June 14 as well as in-person congressional meetings.

**Option #2: Virtual Conference Only**

This option includes access to the virtual conference only, allowing residents, medical students, and affiliate executive directors/CEOs to participate free of charge.

Registration is open through the end of May, and on-demand content is available for viewing through June 14. Registration Fees: AOA Members: \$259; Non-Members: \$599; Residents: \$50\*; Students: \$50\*; Affiliate executives \$125\*

Pricing for in-person Congressional meetings.\*

**Osteopathic Medicine is 'Good Enough' for the U.S. Presidents and the United States Army**



According to records kept at the Richard Nixon Presidential Library and Museum, W. Kenneth Riland, DO provided osteopathic manipulative treatment to President Richard M. Nixon at the White House two to four times a month in 1969 and 1970. He also traveled with the president to China and the Soviet Union.

U.S. Navy Captain Sean Patrick Conley, DO, FACEP, served as White House physician and physician to the president from 2018 to 2021. He treated President Donald J. Trump when he tested positive for COVID-19 and acted as the president's chief White House medical advisor during the pandemic.

U.S. Navy Commander Matthew V. Speicher, DO presently serves as White House physician, Joseph R. Biden administration. He travels with the president, vice president and their families.

Colonel (Retired) Kevin O'Connor, DO served as physician to the vice-president Joe Biden and provided primary care to the second family while at the White House as well as being in charge of medical and emergency plans during travels he made as vice-president. A few days after his inauguration, President Joe Biden announced that he would appoint O'Connor as the White House physician. Dr. O'Connor discussed how he got on Dr. Biden's preferred list with osteopathic manipulative therapy and multiple entertaining stories when he was a featured speaker at the ACOFP Conference at Disney World in March 2023.

Preceding a change of command ceremony, Lieutenant General Mary Krueger Izaguirre, DO was sworn in as the 46th Surgeon General of the U.S. Army on January 25, 2024. Of the 46 U.S. Army Surgeons Generals, she is the second osteopathic physician. The

first osteopathic physician to hold the rank was Lieutenant General Ronald Ray Blanck, DO. He served as the 39th Surgeon General of the U.S. Army for 1996 to 2000. Dr. Blanck, who served a tour in Vietnam as a battalion surgeon, was one of the first DOs to practice medicine as a commissioned Army officer.

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## Joe Huong, DO Hasn't Missed a Step in the Past Twenty Five Years



*As told by Cassandra Donnelly, MD, Regional Medical Director, Piedmont Urgent Care*

Joe Huong, DO is a 2009 graduate of PCOM Georgia who is practicing in an urgent care facility. He serves on the Board of Directors of GOMA. He was recently featured in PCOM Digest in the “Strengthened by Support” profiles in which co-workers highlight what great work PCOM alumni are doing. We felt that GOMA members would enjoy getting to know Dr. Huong a little better.

“I met Joe about 10 years ago as a new physician working at Piedmont Urgent Care, which was known as Wellstreet Urgent Care when we both started. ... Dr. Joe, as we affectionately call him, was a caring physician and a super-helpful colleague if I had a question or was struggling with an electronic medical record in those first days. He had a great bedside manner, and his patients seemed to love him. It was just a joy to work alongside him. ... I recently filled in at a center where he was working. I’m the regional medical director now; Joe is a senior director. But it felt just like eight years ago, when we last clinically worked side by side. He’s always jumping in,

always making sure that you know he'll not only carry his load but help you if you need it. ... Dr. Joe is a wonderful clinician. He's a listener, and he is intentional. So he finds ways during a visit to connect with the patient, to make sure they know that during that visit, they're the only one who matters. He goes out of his way to provide that customer service to a patient who needs it when they are usually at their worst and facing someone they likely have never seen or spoken to before. He has some of the highest patient satisfaction scores. ... At the same time, he's really fast! So I imagine what happens is that he is in a hurry, but not in a rush. I think that his patients forget about the length of the visit, because they recognize how meaningful it was. ... He's also an excellent clinical teacher. Not everyone will or can latch on to his efficiency; it's something that has to be studied and learned. But his goal is for that new physician or new advanced practice provider to take something that they can tuck into their repertoire, and use it when they need to. ... Dr. Joe gives back to his school, to his profession, to his colleagues. He pours out to his patients that which he has learned.”



A quick congratulations to GOMA member Dr. Logan McCool who is a physiatrist in Douglas, Georgia who specializes in sports medicine and helping individuals with nerve compression. He won the GOMA drawing for tickets to Beetlejuice the Musical and rewarded his favorite nurse Julie by allowing her to use the seats at the Fox Theatre.

Dr. McCool is a graduate of the Des Moines University College of Osteopathic Medicine. He did a residency in Physical Medicine & Rehabilitation at the University of Minnesota and a Sports Medicine

Fellowship at Self Regional Medical Center in Greenwood, SC. For the last three years, he has been working at Southeastern Orthopaedics and Surgery Center in their Douglas, GA, Fitzgerald, GA & Alma, GA offices.

Join GOMA or Renew Your Membership Today!

## Xavia Taylor, DO Plans on Making an Impact in South Georgia



Xavia Taylor, DO who is doing an internal medicine residency at Archbold Memorial Hospital in Thomasville, GA is a 2023 graduate of PCOM South Georgia. Dr. Taylor was featured in the *Atlanta Journal Constitution* in an article entitled “What is an Osteopath? Georgia School’s Graduates Caring for Rural Communities” (September 22, 2023).

“According to the Federation of State Medical Boards, 90% of physicians in the United States have a doctor of medicine degree (MD), compared to 10% with DOs. Georgia’s physician makeup consists of 92% MDs (38,109) and 8% (3,284) DOs, but a school is working to close this gap.”

“The only osteopathic medical school in Georgia is the Philadelphia College of Osteopathic Medicine, which educates DOs at its two Georgia campuses — one in Suwanee and the other in Moultrie. The school of 534 students is now the third largest medical school in



Georgia and some of their graduates are helping solve a shortage of doctors in rural counties.”

The article focused on the impact that PCOM Georgia and PCOM South Georgia are having on health care in rural communities.

“For Dr. Xavia Taylor, the reality of rural health disparities hits close to home and has influenced her path to becoming a practicing physician. Taylor, an internal medicine resident physician at Archbold Memorial Hospital in Thomasville, grew up in Colquitt County, where Archbold is located, north of Valdosta. To her, a career in osteopathic medicine means being able to serve the community she was raised in. ‘I never thought that I’d be given the opportunity. I knew I wanted to go to medical school, but I was always under the impression that I would have to go away for at least that part of it,’ Taylor said. ‘I have always wanted to practice and giving back to my community is very important to me.’”

[Read the entire article here.](#)

## **PCOM Georgia student Gehrig Ornelas Observes Earth Day Everyday**



Earth Day this year is Monday April 22nd, and once again it reminds us of the beautiful planet on which we live with its spring colors. Of course, environmentalists use the day to educate about the different ways that humans can help preserve the earth that we know and love.

PCOM Georgia osteopathic medical student Gehrig Ornelas (DO '25) is the perfect person to learn from in this regard, and we caught

up to ask him a few questions by email and phone. The Q & A below is abridged due to space limitations of this newsletter.

Student doctor Ornelas grew up in the suburbs of Southern California in the towns of Walnut and Diamond Bar at the East edge of Los Angeles County. The house was near and among undeveloped hills, woodlands, and canyons that he grew up hiking. His early education did teach him about health and environmental issues, and he recalls spending some of his childhood watching Captain Planet, reading Ranger Rick, admiring Steve Irwin, etc. He also grew up cultivating lifelong interests in martial arts, hiking, fitness, video games, writing, and all sorts of what we now call “edutainment.” “I love and have always loved learning about history, science, nature, technology (especially clean technologies), futurism, science fiction, health, and astronomy. I think these interests have given me a rather expansive perspective of humanity and our place in the universe... and how important it is that we don’t fail to stop the mass extinction event we are currently at risk of causing,” Ornelas wrote.

After Walnut High School, he first attended Mt. San Antonio College (Mt. SAC) where he earned 3 associates degrees: Mathematics & Natural Sciences, Behavioral & Social Sciences, and Language Arts & Communication. It’s also where he took a “Humans and the Environment” class which he says “really opened my eyes to the necessity of urgent climate action, and how acting on climate change would solve most other major environmental issues as happy side effects. The professor who taught it, Professor Craig Petersen, was the faculty advisor for the school’s environmental club E.A.G.L.E. (Environmental Action Group for a Liveable Earth),” where he first became a member, then activities manager, then treasurer, and lastly President.

After Mt. SAC, he transferred to UCR (University of California Riverside) where he earned a bachelor’s degree in Business Administration with an emphasis in Environmental Management, a ‘Green Business’ degree, with which he hoped he could speed the adoption of clean energy transition technologies. He subsequently

worked a variety of jobs before deciding to return to school to become a physician, stating he figured “That the voice, education, and authority of a family doctor would give me the ability to make a greater impact on changing perspectives to get more people to act on the worsening climate crisis, all while my day in and day out work would be spent cultivating health, saving lives, and improving people’s quality of life. So, I went back to Mt. SAC to do my premed before working as a scribe first in Family Practice then for a few years in the Loma Linda Murrieta Emergency Department, where I worked all through the COVID pandemic. . . I started medical school in August 2021 at PCOM GA in Suwanee.”

“I greatly enjoyed my first 2 years of medical school, difficult and stressful as they were, before going on to enjoy nearly all of my rotations in 3rd year. I make it a point to go back to the school frequently, both to use the gym, and to keep in touch with my professors. Since the first year I’ve benefited greatly from the ability to work so closely with many of my Professors at PCOM, many of whom haven’t just been excellent teachers of medical knowledge, Drs. Waters and Yarid in particular have given me excellent further training in OMM for rotations, several have greatly facilitated and collaborated with me on my climate action work.”

“In my first year of medical school, I founded, and was President of, a climate action club called ‘Climate Shield’ which was utilized to spread knowledge of the causes and solutions of the climate crisis among the student body and faculty... At the end of year one, I launched a campaign wherein Student Doctors called and wrote multiple Senators and members of Congress to encourage retaining the clean energy transition and other climate action aspects of the Build Back Better plan into future legislation, which we later saw in the Inflation Reduction Act. I also was able to get my first electric vehicle in my first year of med school, a Chevy Bolt, after which many people close to me also got EVs. The faculty advisor of Climate Shield, Dr. Bonnie Buxton PhD, attended my presentation on ‘The Causes of and Solutions to the Climate Crisis on a Single Slide’ which led to collaboration on a lecture. She eventually invited me to give called “The Health Impacts of the Climate Crisis with

Causes and Solutions.” Apparently, it’s been quite a hit. She’s now had me do it twice and invited me to do it a third time next year, saying it was a standout presentation and well-reviewed by the students. I am also currently working with two other PCOM professors, Drs. David Adelstein, DO, and Erika Rushing, MD, on a medical research paper meant to incorporate Air Pollution and Greenhouse gas emissions into annual wellness visits in primary care.”

**Q: There are so many concerns about the human impact on the earth. What are your top concerns?**

**GO:** The Climate Crisis. The Climate Crisis. The Climate Crisis. Nothing else even comes close, though I would add Air Pollution as a companion issue to Climate change. As they have most of the same causes, namely burning fossil fuels, but while the climate crisis threatens to trigger a mass extinction event that will make what killed the dinosaurs look tame, it seems a less immediate, and more politicized, threat than air pollution which kills between 6 and 9 million people a year. If you can get people to act on air pollution it usually addresses greenhouse gas emissions at the same time.

**Q: Many say that we shouldn't worry about human impact. They say that the changing readings are part of a historical ebb and flow of environmental changes. What do you respond?**

**GO:** The current observed changes in the Earth’s global climate are very clearly not in line with the natural cycles of the Earth’s climate, but instead align as expected with the increase in global greenhouse gas emissions caused by human activities, mostly burning fossil fuels. This position is not just the position of over 97% of all current climate scientists but the science of this is SO clear that since 2007 not a single scientific body of international or national standing anywhere on Earth still disputes it. This includes national and international medical organizations. The last such organization to join this universal consensus was the American Association of Petroleum Geologists, whose jobs literally depended on this not being true, but as of 2007 the evidence was so strong that even they gave up and accepted the reality. The science itself is not particularly

difficult to understand by anyone who has not linked their sense of self to denying this reality.

**Q: Many say that we shouldn't worry about human impact. There is nothing that we do now that will change the eventual destiny of the earth. What do you respond?**

**GO:** This is also not true. First of all, let me point to the over 200 medical journals who specifically released the document called the “Call for Emergency Action to Limit Global Temperature Increases, Restore Biodiversity, and Protect Health” in September 2021. It is just what it says on the tin, a call for every medical professional to take action on the climate and ecological crisis. Every physician and medical professional should read and be familiar with this document, linked here: <https://www.nejm.org/doi/full/10.1056/NEJMe2113200> and here is a link to the list of journals that published and or declared their support for it <https://www.bmj.com/content/full-list-authors-and-signatories-climate-emergency-editorial-september-2021>. It says that “as health professionals, we must do all we can” to “keep global temperature rise below 1.5 C,” which is called “the greatest threat to global public health.” Second of all, it is important to realize that climate crisis denial takes many forms, all of which are false, but the one thing they all have in common is they all end in the same place: “Do Nothing.” All of these arguments have been promoted by the fossil fuel industry in a conscious, expensive, long term misinformation propaganda campaign meant to delay change for as long as possible, regardless of the harm it does.”

**Q: As clinicians, what can doctors do to make a difference both in practice and our personal lives?**

**GO:** A LOT. As physicians we can do SO much. Indeed, we may be the most crucial front to address this issue. Sir David Attenborough spoke truth when he said “Saving our planet is now a communications challenge. We know what to do, we just need the will.” Clinicians can help cultivate that will. As I said earlier, clinicians have a disproportionate voice. Clinicians have authority, particularly on issues of human health. Clinicians need to speak up in whatever way they can to ensure that the public knows that the climate crisis, and air pollution and all other issues that come with climate change,

are, first and foremost, issues of human health and safety. Framing an issue as “environmental” tends to put it pretty low on most people’s list of priorities, WE have the ability to show that these issues are immediate, short-, and long-term issues of human health and safety, of self-preservation, and preservation of those they love and care for.

It is crucial to understand that there are 5 levels of action, all of which are magnified as a physician: 1st Personal, the things we do ourselves. 2nd Family and Friends, who are easiest to sway to change their own personal actions. 3rd Community, action among schools, hobby groups, workplaces, and so on, here physicians really shine. 4th Online, our actions online can contribute subtly or dramatically to the greater zeitgeist. 5th Political Macro, voting, calling, writing, and demonstrating.

When I say speak up in any way they can, I mean with patients individually, in conferences, in research, in education, as teachers, in interviews, online, any time someone is listening to a clinician in their capacity and authority as a clinician and or respected member of a community and there is appropriate opportunity to discuss the climate crisis, and air pollution, as a human health and safety issue, we should take the opportunity to talk about it. To talk about the threats it presents, the causes, the disinformation, and, crucially, we must talk about the solutions... the treatment, and advise all who will listen to embrace those solutions. We should encourage these top “bang for buck” actions, and do them ourselves to set an example:

1. Voting for and otherwise supporting political candidates who take addressing the climate crisis seriously and CAN actually win and bring the needed changes in legislation.

2. Encourage people to transition to Electric Vehicles as soon as they can. Honestly, I think referring to gas and diesel vehicles as “toxic tailpipe vehicles” might also go a long way, everyone knows what comes out of a tailpipe is bad for them, I think they would benefit from being reminded by someone with authority. Becoming educated on EV misinformation and its counters is important. A quick tip is that most criticisms are out of date, out of context, and or

quickly dissolve if the same level of scrutiny is applied to toxic tailpipe vehicles and their supporting industries.

3. Encourage people to eat less beef specifically. Emphasize that they don't have to become vegan or vegetarian, just that all other meats are better for them, and the climate and environment in general. After beef, the distant second and third foods to reduce, again framing as reducing is more effective than banning, are lamb and cheese respectively.

4. Switch out gas, or other fossil fuel based, home appliances for the heating of space, food, water, and dryers in favor of electric based appliances, with special emphasis on heat pumps and induction technologies. Bonus points for improved efficiency, insulation, and solar panels on the home.

5. Encourage people to learn about the effects, causes, and solutions of the climate crisis and to talk about it more, always with emphasis on the solutions framed in human health and safety. The Inflation Reduction Act has a great deal of money in it for people to make many of these changes, but most people do not know about it, we should help people learn about it when possible. We need to understand that austerity measures have been tried for decades and they simply do not work. Very few people will sacrifice and give things up, instead the superior alternatives, and the ways they are superior even if there are currently both pros and cons, need to be presented as "upgrades." Synergy is helpful, connecting these issues to other more personal health issues. For example, emphasizing getting gas appliances out of a home for someone suffering from respiratory illnesses, who is pregnant, or with higher risk of CAD, or eating less beef and cheese in a patient aiming to lose weight, improve their lipid panel, or prevent worsening heart disease. People need to understand that: "we have everything we need to address the climate crisis. We just need to do it swiftly, boldly, and consistently."

**Thank you student doctor Ornelas! Your passion and holistic perspective regarding climate change seems to be a**

21st century osteopathic philosophy. Good luck on your journey to becoming a family physician!

## Learning Nutrition Through Gardening at PCOM South Georgia



PCOM South Georgia's Student National Medical Association (SNMA) has been working with members of the Moultrie-Colquitt County Boys and Girls Club on a project that combines cultivating a vegetable garden with lessons in nutrition.

"This project started from a desire to engage students in learning more about nutrition and the benefits of healthy food and a healthy



lifestyle,” SNMA member Shiley Pierre Louis (DO '25) said. “It is one thing to know that we should eat healthy food, but it is better when there is a tangible example of what it means and the process that makes it a reality.”

Boys & Girls Club members look forward to working with the PCOM students during the after-school program.

“They get off the bus near the garden,” said La'Teegra Fiveash, program director of the the Boys & Girls Club. “They check out the plants as they walk by. They're just fascinated that they can watch something grow like that. Many of them have never had a garden before working with the PCOM students.”

“One thing I hope the members take away from this is the inherent enthusiasm for learning about nutrition,” SNMA member Emeka Ikeakanam (DO '26) said. “There are many aspects of nutrition that they are currently learning from us, such as vitamins and minerals, healthy eating and self-sustainability through growing food. However, if the members can retain the motivation to learn about nutrition throughout their lives, that will lead to them living healthier lives and give them the ability to impact others through their legislative initiatives.”

### The Georgia Legislature: Long Days and Lots of Bills

deliberated bills in Committees until midnight, sending a regular flow of House bills to the Senate floor and Senate bills to the House floor. As Senators came to the well to give quick bill summaries, Sen. Sally Harrell started documenting all the ways legislators refer to a bill.

Here is her Top Ten:

- 10) Housekeeping bill
- 9) Transparency bill
- 8) Frankenstein/Zombie bill
- 7) Department bill
- 6) Lawyer bill
- 5) Christmas tree bill
- 4) Governor's bill
- 3) Clean-up bill
- 2) Good bill

And the Number One kind of bill. Ta-da!

1) Simple bill. (Beware the simple bill!)

Next month, we will summarize the health bills that were passed through both houses of the Georgia Legislature and being considered by Governor Kemp for signature into law.



**In Other Words**

***“No man’s life, liberty, or property are safe while the legislature is in session.”***

**-- Mark Twain**

**(seen above talking to Andrew Taylor Still, DO)**