



North Coast Physician

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Cover Photo

"BOAT AT STONE LAGOON"

Stephen Kamelgarn, M.D.

The Editorial and Publications Committee encourages our member's comments for publication. Please submit electronically prior to the 15th of the month preceding publication. hdncms@sbcglobal.net

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Helping Hands

Join Y. Luh, M.D., FACP, FACR



Just about every conference/meeting I've attended over the last few years has always had a session on mentorship. Journals have been brimming about articles about mentorship of medical students, residents, and junior faculty. There are articles on how to find a mentor, how to be a mentor, do's and don'ts about mentorship, and the importance of mentorship.

The medical education literature now has turned mentorship into a science. They now have a classification system for mentorship, as shown by the table below.--

<u>TYPE OF MENTORSHIP</u>	<u>DESCRIPTION</u>
DYAD	A SINGLE SENIOR MENTOR WORKS WITH A SINGLE JUNIOR MENTEE.
MULTIPLE DYAD	MULTIPLE SENIOR MENTORS WORK WITH A SINGLE MENTEE ON DIFFERENT TOPICS.
FUNCTIONAL DYAD	A SINGLE SENIOR MENTOR WORKS WITH THE MENTEE ON 1 TOPIC.
SPEED MENTORING	MENTORS AND MENTEES MEET FOR A BRIEF 1-TIME EVENT.
DISTANCE MENTORING	ALL MENTEE/MENTOR COMMUNICATION IS MADE OVER A DISTANCE.
TEAM MENTORSHIP	ALSO CALLED COMMITTEE MENTORING, IN WHICH MULTIPLE SENIOR MENTORS WORK WITH A SINGLE MENTEE, NO MENTOR IS LIMITED TO A SINGLE TOPIC, AND THERE IS INTERACTION AMONG THE DIFFERENT MENTORS.
PEER MENTORSHIP	PEERS OF APPROXIMATELY THE SAME RANK FILL BOTH THE MENTEE AND MENTOR ROLES.
FACILITATED PEER MENTORSHIP	A SENIOR MENTOR OVERSEES PEER MENTORSHIP

None of the the classifications really matter to the mentee. Mentorship is an art and a labor of love. When I've been asked who was/is your mentor, I don't have a straight answer. I've actually had many people throughout my life who gave me a helping hand--it may have been one time or a series of times over several years. I didn't think about whether my relationship with them was a dyad. Help came from people of all walks of life at a time when I had nothing to give in return.

In the 6th grade, I came across the book "Experiments in Electricity" at the library. It had really neat instructions on how to make an electric switch, buzzer, and motor, among other things. The materials needed were mostly household items--copper wire, tin cans, metal strips, wood blocks, alligator clips, 6V battery, etc. It was hit or miss with the materials I could find in my garage. I wanted to make these items for my science fair project.

So my mom took me to Galveston Electrical Supply Company to see if I could get some advice (she literally dropped me off there). A pale and thin spectacled elderly man with a deep Southern drawl was there and I showed him some of the things I made. I just couldn't get my tin can motor to work.

He perused through my library book and said he could help. He showed me how to wrap wires around metal to maximize the number of coils to create a strong electromagnet. He taught me how to make a radio out of pencil lead and 2 razor blades. He showed me how to cut and bend metal strips. I must have been there for 3 hours. He went to the back of the shop and came back to the counter with extra motor wire, metal strips, electrical tape, and a few other supplies.

By this time, my mom came back and offered to pay for the supplies. He put his hand up and said he wouldn't take anything. He just wanted to help me do well on my science fair project and wished me luck. I won first place. I made one feeble attempt to go back and tell him, but he wasn't there and one of his employees promised to let him know and convey my thanks.

Years went by, and eventually the shop closed and ironically is now a funeral home. To this day, I regret never having had the chance

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to tell that elderly gentleman in person, how much I appreciated his help and mentorship for that one afternoon.

In high school, Mr. Scott wasn't even my assigned high school counselor, but you could always find him in the counselors office hallway, where there was a waiting room with sofas where students (who didn't have cars to go off campus) would hang out during the lunch hour. Mr. Scott was a popular counselor, well-liked by students. He was a large imposing African American man with a personality like James Earl Jones and a deep voice not quite like Darth Vader. He took a special interest in my academic future and handled a lot of my scheduling requests, as my assigned counselor had more of a hands-off approach.

My single working mom, educated overseas, had no knowledge of the processes involved in applying to US colleges, applying for financial aid, and the importance of Advanced Placement (AP) classes. It was Mr. Scott who told me about the dual credit arrangement Ball High School had with the local community college, and helped me register for concurrent college credit while I took AP Biology, American History, English, and Calculus BC--for the cost of \$14 per semester.

As an active member of the Galveston Island Rotary Club, Mr. Scott invited me to speak at one of their lunch meetings, where I enjoyed a free lunch at the newly opened San Luis Hotel Resort & Spa overlooking the Gulf of Mexico, where I talked about the importance of vocational education and got some AM radio air time--pretty cool back then for a high school student.

Galveston had a lot of private foundations, organizations, and memorial scholarships. Mr. Scott would somehow bump into me in the hallway between class periods and put a scholarship application in my hand, saying--"Fill this out!" Thanks to Mr. Scott, I landed scholarships from the local Elks Lodge, the Sunseri Memorial Scholarship

Fund, and the Galveston Texas A&M Club. He helped me with my financial aid application so I was able to land both federal and state grants--cumulatively giving me a free ride to college. But it's what he did for me one afternoon in the fall of my senior year, that forever engraved in my mind that I was the beneficiary of a man who truly cared about students.

The deadline for the Moody Foundation scholarship had passed. Mr. Scott somehow got word that my application was not received. My mom had mailed my application, but somehow when she mailed it at work, it ended up being picked up by inter-campus mail at the University of Texas Medical Branch (UTMB). It got sent back to our home address and it was too late to send it again.

Mr. Scott found me in the hallway after school and said, "Join, you still have your Moody Scholarship application?" I said yes. He said, "I'm going to drive you to the Moody Foundation before they close at 5, and you're going to see if they'll take it." With that, I got into his long black 1978 4-door Ford LTD Landau, and we sped to my house where I went in, grabbed the application, and we high-tailed it on Broadway to downtown Galveston (it was like being in the 1966 version Batmobile) and parked outside Moody National Bank.

We ran into the posh lobby, took the elevator to the top floor, and exited into an expansive lobby with grand views of Galveston Island. A VERY attractive receptionist greeted us (they're always attractive at these billion dollar foundations). After telling her the reason for our visit, she smiled (she was so beautiful and I was only 17) and rang the person in charge of the scholarship applications. The logo engraved in green marble right next to the receptionist--"The Moody Foundation--For the Benefit of the People of Texas."

After waiting for several minutes, a much older and stern appearing lady came forward. Mr. Scott explained the situation

and asked if they would be willing to accept my application. I attempted to hand it to her. She put her hands up, shook her head and said, "I'm sorry we cannot accept it. The deadline has passed and we cannot make any exceptions." Mr. Scott tried but she would not budge. We left. I didn't care about the receptionist anymore. The ride back was much slower. No benefits this time.

When applying for summer jobs, if I didn't hear back after submitting an application, Mr. Scott would smile and say "Just go there!"

That was great advice that I found useful even beyond landing summer jobs. If there's a problem, conflict, disagreement, misunderstanding--go there. See the situation. Talk to the people on the ground.

Today, we call this the "gemba walk" from the principles of Lean Six Sigma. Mr. Scott understood, practiced, and taught this principle well before it became fashionable in business circles. Fourteen years later, I followed Mr. Scott's advice in San Antonio, when I "stole" a distressed home sale in contract with a house-flipping investment company (too arrogant to put down earnest money), by showing up in person to the title company with a new contract and a \$500 check in hand (the title company's fax machine was also jammed).

The Moody Foundation scholarship would have been icing on the cake, as I managed to get my college expenses funded through other scholarships, grants, and a work-study program--all thanks to Mr. Scott.

Despite not being successful with the Moody scholarship, the extra mile Mr. Scott went in helping me--using his personal resources beyond his job description--made me appreciate how lucky I was to know him as my unofficial counselor.

"Helping", Continued From Page 23

This was a man who cared about the welfare of students--regardless whether they were assigned to him or not. I know he went on to go the extra mile for other students.

The Charles B. "Chuck" Scott Elementary School (closed in 2008 due to Hurricane Ike) was a memorial to a legendary high school counselor that I count myself very fortunate to have known. He was more than just my high school mentor, you could also say he was a sponsor (bet you thought I was going to say sensei).

Unfortunately, when I returned to Galveston nearly a decade later for my internship at UTMB, he had already passed away. Nevertheless, I was able to express my thanks to his widow Grace Scott and tell her the story of that unforgettable afternoon. You can read Mr. Scott's biography here: (<https://www.chron.com/neighborhood/baytown-news/article/Scotts-shaped-minds-of-youth-in-Galveston-2072315.php>).

In college, medical school, my travels abroad, residency, and here in clinical practice, I have met many more people I consider mentors. Some, like the elderly gentleman at the electric supply store, were mentors for half a day. Others, like Mr. Scott, provided mentorship over a much longer period. Some don't even know that I considered them mentors, like the long haired auto mechanic I befriended in medical school, conveniently located next to Auto Zone, who told me what parts to get when my 1982 Ford Bronco would break down and then let me use his tools--for free.

There are some that I never took the opportunity to thank. There were some I was able to thank so many years after the fact, that I had to remind them who I was. There are many I still keep in touch with. Nevertheless, their help (short term or long term) had a permanent effect on my opportunities and development. I wouldn't be where I am now had it not been for their collective helping hands.

I don't think I can ever get close to

what Mr. Scott did, but as a recipient of lots of help along the long road to becoming a physician, there is a calling to pay it forward. Since being in practice, I've had high school, college students, and PA students spend time in my clinic. I've spoken to the Humboldt State University Pre-Med Society. I've done speed mentoring for residents at my national meetings. I've also had radiation oncology residents assigned to me during our national meetings to mentor over coffee, or for the duration of the meeting. I've fielded questions about job hunting from residents via email and by phone. And now with our very own family medicine residency, there are opportunities to teach and mentor.

Does a mentor have to be older? It seems natural, but shouldn't be a requirement. In 2019, I was invited to write a viewpoint piece in the Journal of the American College of Radiology (JACR) on the use of artificial intelligence (AI) in the radiation oncology clinic. I'm no AI or machine learning (ML) expert, but I love fantasizing about technology that doesn't exist. I enlisted the help of Reid Thompson MD, PhD--a resident at U. Penn when we first worked together on ASTRO's Health Information Technology committee in 2014. I was 7 years into practice, so I was several years his senior. In 2019, I was 12 years in practice, and he was junior faculty at Oregon Health and Sciences University and an established national AI/ML expert, chairing the Oncology Panel of the ACR's Data Science Institute. As we worked together on my manuscript, I had to dance around Reid's busy clinic and research schedule. His first revision of my write up was brutal--plenty of markups and critiques to the ramblings of a small town country rad onc like me. He was the seasoned, albeit young academician, and clearly my mentor in this project--and I thank him for it. (DOI:<https://doi.org/10.1016/j.jacr.2019.05.044>).

HUM-PET (Humboldt-Del Norte Pre Medical Education Task Force), led by our medical society Secretary/Treasurer Dr. Caroline Connor, is fostering interest in health care professions among the high school students within Humboldt and Del Norte counties.

In the fall of 2020, physicians met virtually, with Eureka, Fortuna and McKinleyville High Schools' Biology and Community Health classes, speaking to students about their path to their respective health careers. The Humboldt State University's Pre-Med Society is composed of undergraduate students at HSU interested in pursuing medicine.

Although we all have day jobs and are not in a position to be a Mr. Scott (my vehicle just isn't cool enough), can we offer a helping hand to share our pathway to medicine with high school students?--contact Dr. Connor.

Talk to HSU Pre-Med students?--contact Penny Figas.

Teach/host our family medicine residents?--contact Dr. May Hong or Dr. Courtney Ladika.

Even an afternoon of shadowing--like the gentleman at the electric supply store--can be an unforgettable experience that can positively influence someone's future career. Let's also not forget the Annual Future Physician Scholarship program. If you are interested in donating to the fund, please contact Penny directly or go online to Humboldt Area Foundation to donate. From primary school students to family medicine residents, physicians in Humboldt-Del Norte can also offer their helping hands. §

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North Coast Physician

Drake Equation Revisited

Luther F. Cobb, M.D. FACS



Those of you who are fans of astrobiology (and who isn't?) are probably aware of the Drake Equation. This was formulated by Frank Drake, who participated in the first scientific meeting on the search for extraterrestrial intelligence (aka SETI). One might, of course, ponder whether we have reached the point of terrestrial intelligence yet, but I'll lay that question aside. In brief, it summed up the mathematical considerations about whether intelligent life could have developed on the trillions of possible worlds in the vastness of our galaxy (as the rest of the extragalactic Universe is too far, based on the speed of light, to be accessible to electromagnetic signals); and if so, could they have developed those signals that would reveal such development to those of us on Earth who were watching for such signals.

This equation was formulated as N , the number of civilizations in which communication might be possible as the product of (1) R^* , the average rate of star formation in the galaxy (2) F_p , the fraction of those stars that have planets (3) N_c , the average number of planets that could potentially support life per star that has planets (4) F_l , the fraction of those planets that actually do develop life at some point (5) F_i , the fraction of those planets whose life develops intelligence, i.e. civilizations (6) F_c , the fraction of such civilizations that can develop the technology to produce and release detectable signs of such existence into the vastness of interplanetary space, and (7) L , the length of time for which such civilizations actually do release such signals (that is, presumably before they develop the technology to blow themselves into oblivion with nuclear weapons; this part is my little amendment).

This interesting question has elicited a lot of controversy and research, especially

since astronomers have found that indeed most stars appear to have planets, and even in our local neighborhood, several Earth-like planets have been discovered, which is pretty exciting. Signals from possible extrasolar planets have been sought for many years using radiotelescopes, in large part the Arecibo telescope, which is, alas, no more, but no plausible sign of life outside our Spaceship Earth has yet been detected, so it remains an open, if fascinating, question.

But this led me to contemplate a similar equation, as to the epidemic of firearms violence in our home country, the good old U S of A. One of the signs that we are emerging from the Covid interregnum appears to be the reappearance of multiple random gun violence, as witnessed by the three recent episodes of multiple murders by gunfire in the news.

Obviously, firearms violence is the product of multiple factors. It seems to me that when these issues are discussed, one side or the other usually focuses on one, or perhaps two, factors, claiming that the other ones are either irrelevant or, as in the case of the Second Amendment, not subject to discussion or alteration.

I think it is self-evident that deaths and injuries due to firearms are the mathematical product of adverse interpersonal interactions, multiplied by the lethality of the instruments used to effect resolution of those interactions, plus the notable effectiveness of a gun for committing suicide. It is often forgotten, or left unmentioned, that around half of the deaths due to firearms in the US are self-inflicted. And most of these deaths, of course, are not the multiple atrocities that have been lately noted, but that occur daily across the country.

I have a great deal of experience in the

sociology and medical aspects of firearms violence, having been the director of an urban Level One Trauma Center for 12 years, prior to moving to Humboldt County. We had an average of 2400 trauma alerts annually, many of which I dealt with personally, and all of the other cases I reviewed personally. This is of course in addition to my experiences in residency training, and since moving here. One thing I can say is that the idea that a firearm is an effective measure of self-defense is untrue; I have never seen a "bad guy with a gun" taken out by a "good guy with a gun", but I have seen an awful lot of the converse. So, either the homeowners defending their castles are universally lethally effective, or that scenario is quite rare. I can't say it never happens, but it is very unlikely. Available statistics (which are rare as Congress has enjoined the CDC or other statistics gatherers from considering firearms violence as the public health issue that it is) demonstrate that a person is much more likely to hurt or kill someone they know, or themselves, than they are to successfully defend themselves from harm. One obvious reason is that an ethical gun owner is going to make sure that whoever he or she is firing at is an adversary or intruder, rather than, say a spouse or a child, whereas the ostensible intruder has no such compunctions; thus the intruder (a rarity in any case) has the obvious advantage. And, tragically, spouses, acquaintances, and yes, children, are not uncommonly the victims of such mistakes. I have seen several of those. I have also personally seen and cared for three police officers or sheriff's deputies who were killed with their own weapons.

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"Hospital", Cont. From Pg. 9

of miles. Recent recruitment efforts that have changed the Emergency Medicine and Hospitalist Medicine groups from largely transient physicians to programs in which most physicians are employed or contracted with the St. Joseph Health Medical Group. This creates a strong platform for quality of care and on which to build improved patient experience. The Level II NICU, higher volume, numbers of anesthesiologists and training of Family Medicine Residents makes it the appropriate site for a consolidated program. Plans are currently underway to renovate and remodel the existing obstetrics unit at SJE to best meet the needs of the county and to promote a nurturing environment for mothers and babies.

RMH was designated as a Critical Access Hospital in 2005, an acknowledgment of the important role it plays in providing emergency services and short-term medical care to members of the community. The focus on emergency services, medical and surgical services, some sub-acute rehabilitation services, and a Rural Health Clinic that provides primary care is consistent with the Critical Access Hospital designation that was sought and granted in 2005. This model is consistent with other critical access hospitals in Northern California, such as Jerold Phelps Hospital, Adventist Howard Memorial Hospital and Healdsburg Hospital, which don't have obstetric services. In addition, the recent closures of birth centers at Adventist St. Helena Hospital and Sonoma Valley Hospital underscore the difficulty in maintaining rural obstetric programs. Please know that RMH will continue to be a special place and a vital component of Providence's care delivery network in Humboldt County. The new acute inpatient rehab unit project at RMH is just one example of the commitment hospital leadership has made and will continue to make in the Eel River Valley.

I've attached a PowerPoint presentation which outlines the current state and the

rationale for the consolidation, and I'd be happy to discuss this further at an upcoming meeting.

The goals of the combined program include:

- Excellent patient outcomes
 - Enhancing Health Equity - a specific program for the Tribal Communities will be developed
 - Recruitment and retention of OB GYN Physicians
 - Collaborative environment for certified midwives, Family Physicians with obstetrics privileges and OB GYN physicians
 - Training site for Family Medicine residents
 - Effective communication with patients, providers.
 - Model that supports a sustainable OB program at the same time as investment in Cardiology, ortho, CV surgery. hospitalist programs, ED care.
 - Retain RMH RNs (no layoffs related to this)
 - Enhance environment of care - a substantial renovation is planned
- HDNMS members and interested community members can find our statement and FAQs related to RMH obstetrics, on our website at <https://www.providence.org/news/uf/650228227>

Consistent with our Mission, our goal will always be to focus on the dignity of our patients and the quality and scope of services the Humboldt County community needs, while remaining good stewards of our resources.

Now that the decision has been finalized, we are focused on implementation and communication. While change is always challenging, I hope that you will support this plan which is in the interest of the moms and babies we serve, as well as, all those in the community who need a strong healthcare system with diverse capabilities.

*Warm regards,
Roberta*

"Opinion", Continued From Page 5

who were killed with their own weapons. If they, with their professional training and advantages, can be overwhelmed, I doubt the average John Q, Homeowner is more likely capable.

It is manifestly true that firearms escalate an adversarial encounter to lethality more effectively than any other available weapon or resource. Yes, it is possible to beat or knife someone to death, and that certainly happens, but it takes a lot more personal effort, risk, persistence, and time, than does firing a weapon.

It has been noted that there are now more firearms in the USA than people, and that 20 million more were purchased just in the last year. As a child growing up in the South, I learned how to handle long guns and shotguns, and went hunting with my father; it was kind of a rite of passage. But I don't own, and don't want to own, firearms today. Folks who think that they are safer with them are sadly mistaken.

Will there be any change in my lifetime in this situation? Sadly, I doubt it, but I think if more people understand that guns are not the solution to personal safety, that would be a good start. It is clear that the provisions of the Second Amendment, as interpreted by the Supreme Court, are unlikely to change. Alas. §

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REGISTERED NURSE needed – Northern California Community Blood Bank. Contact: Tiffany Armstrong, tarmstrong@nccbb.org (707) 443-8004. www.nccbb.net/employment.html

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