

Reflecting on the past to see our way ahead

DCMS President Kevin W. Klein, MD, made these remarks at his Jan. 17 installation dinner at Park City Club.

Good evening, and thank you for coming tonight. It is a great honor to be installed as the 136th president of the Dallas County Medical Society. I truly am humbled by the experience and will do my best to leave our institution a little better than when I started.

A short time ago, a friend and colleague asked, “What does the medical society *do*?” I was trying to persuade him to join, and my reply was not as compelling as I had hoped. But this encounter forced me to reflect on the history of the Dallas County Medical Society and its importance to our community.

In the beginning

In 1876, Dallas was the Wild West and there were few standards for medical practice. To address this, 17 doctors formed a society to promote public health, advocate for physicians and their patients, and uphold professionalism in the practice of medicine. They met in their offices to socialize and to discuss scientific articles and treatments of the day. Hand-written ledgers show that attendance was kept, dues were paid and membership was expected of all respectable practitioners. Malaria, yellow fever, typhoid fever, cholera, and smallpox made up the bulk of medical practice. There was no hospital — only a pest house, subsidized by the city, where people with contagious diseases went to recover or die. There was not a reputable medical school in the entire state.

Medicine has come an unimaginably long way in the past 143 years, and Dallas County Medical Society has played an invaluable role in the development of the profession of medicine in Dallas. We now are the second-largest medical society in the country, with about 7,600 members. In early years, the Society facilitated the founding of our hospitals. Baylor, St. Paul, Parkland, and Methodist hospitals all were established by the 1920s with the support of the society. Baylor College of Medicine and later Southwestern Medical School were established by the leadership of medical society presidents Drs. Edward Cary and Charles Rosser. We still maintain the annual tradition of the medical society president delivering the Hippocratic Oath to UT Southwestern’s graduating classes.

The medical society has guided Dallas through several health crises over the past century, including the Spanish flu pandemic of 1918, the polio epidemic of the 1950s, and the AIDS crisis in the 1980s. More recently, the Society

organized the community response to the West Nile, Ebola and Zika viruses. Whenever a catastrophic event affects Dallas, the medical society is there to help. Hurricanes Katrina, Ike, Rita, and Harvey all caused evacuees to seek shelter in Dallas, and DCMS provided the leadership and resources to help manage their attendant health issues.



Kevin W. Klein, MD

Staying relevant in changing times

During the Great Depression, the Society began transitioning from a primarily social organization to a unifying force in organized medicine. This occurred in close collaboration with the Texas Medical Association. Advocacy for our patients and our profession is an important part of our medical society’s mission today. After hearing TMA President Doug Curran speak at several meetings, I want to echo his call for civility and compassion in our efforts to affect public policy. As an organization representing our profession, we must be inclusive and respectful of differing points of view. We must not be categorized as representing one political party or another. We must not be viewed as a “good ol’ boys club”; rather, we must embrace diversity with respect to race and gender in our membership and leadership.

Legislative action. Obviously, the role of DCMS has changed over the years and will continue to evolve. So, what will DCMS do this year? The Texas Legislature convened last week, and much of its agenda will relate to medicine. Physician involvement in the legislative process is critical. As is often said, “If you aren’t at the table, you’re on the menu.”

The TMA has developed a successful program of advocacy called First Tuesdays, and I urge you to take part. On the first Tuesday of February, March, April, and May, physicians will gather at the TMA building in Austin to walk together in white coats to the Capitol to meet with their legislators. I do not consider myself a politician, but I do hope to be an informed physician citizen, and I have found First Tuesdays to be enlightening and worthwhile. After attending just one First Tuesday, I walked away with a good understanding of the medical issues of the day and

felt like I could make a difference. DCMS and TMA do a fantastic job organizing the event and making good use of our valuable time.

Physician wellness. Additionally, DCMS is developing an exciting initiative — a physician resilience and wellness program started by our immediate past president, Ruben Velez. According to the National Academy of Medicine, 50 percent of physicians report significant symptoms of burnout. This new epidemic is taking its toll on American physicians. DCMS has joined the National Academy of Medicine’s Action Collaborative to identify knowledge, tools and ideas that can reduce physician burnout. We are studying ways the medical society can directly assist physicians and their families when symptoms of burnout arise. DCMS has formed an ad hoc committee to evaluate the best way to move forward.

Membership. While DCMS president, I will focus on increasing our membership. We remain one of the largest and most active societies in the country, but membership has plateaued, despite a growing number of physicians in Dallas. Years ago, all respectable practitioners were expected to maintain medical society membership, but times have changed and new challenges have arisen. Many physicians who come to Texas from out of state are unaware of the benefits and value of medical society membership. Academic physicians mistakenly may believe that the medical society does not represent them and benefits only private practitioners. Residents and fellows are busy with their training and may not have given thought to joining.

This is where I would like to make a difference. Before tort reform, all residents at Parkland and

UT Southwestern were automatically enrolled as TMA and DCMS members in order to participate in Texas Medical Liability Trust insurance. This is no longer the case, and resident enrollment has fallen from 100 percent to 5 percent. When new house officer orientation begins in June, I plan to be on site with TMA and DCMS to sign up as many residents and fellows as we can. It will take a coordinated effort, but I am hopeful we can enroll more than 500 members. I also would like to consider adding a resident and student to the DCMS board of directors. My hope is that these young, new physicians will invigorate our society and position us for growth.

The answer is ...

So, to answer the earlier question about what does DCMS do, I would say it works to bring physicians together to help preserve the physician-patient relationship. This intimate bond based on the promise to do our best to preserve and enhance health, and to relieve suffering of the individual, makes us unique. And, together, we are

stronger and better able to manage the outside influences that inevitably get between the physician and patient.

With appreciation

In closing, I would like to thank the Reverend Walt Marcum for delivering our invocation. Walt is a pastor at Highland Park United Methodist Church and a leader in youth ministry. He has developed a nationally recognized program for the year of youth confirmation. I learned much from him while serving as a small group leader to get all my kids through confirmation.

I also thank Dr. Doug Curran, the TMA president, for being here tonight. Doug is a family medicine physician from Athens and a really busy guy, so I encourage you to take a moment tonight to welcome him. Texas physicians are in great hands under his leadership.

Thanks also to the past presidents of DCMS, especially Dr. Velez and Dr. Carlo, with whom I have worked closely for the past few years. All of you have been exceptional role models.

And, thanks to the wonderful DCMS staff led by Michael Darrouzet and Connie Webster, without whom this job would not be possible. Since 1945 we have had dedicated professional administration of our society, and it is the secret to our success. I am excited and enthusiastic about working with you this year. I hope we avoid any disasters, but with you, I know we are well-prepared.

**“What does the medical society *do*?”
a colleague asked.**

I thank my UT Southwestern family for your support and for joining me tonight. I’ve been at Southwestern my entire career and it has been a dream job, thanks to you.

Finally, I would like to thank my friends and family. My father, Dr. Garner Klein, a retired cardiologist from Harlingen, inspired me to become a physician. When I asked what it took to be a good doctor, his reply was that you have to really want to take care of sick folks. He still is my hero. My wife, Jorie, is my inspiration for compassionate care of my patients. She is in charge of Trauma Nursing and the Emergency Department at Parkland Hospital, and, yes, it is as challenging as ever. Our son, John, is in his second year of general surgery residency at Rush University in Chicago. Our daughter Allie is a senior medical student at the McGovern School of Medicine in Houston. And our youngest, Tori, is studying at Southwestern University and considering her options.

I know that with young folks like this going into medicine, our future is secure, and they honor us by following in our footsteps. **DMJ**