



THE FAMILY OF MEDICINE TOGETHER WE ARE STRONGER

KEVIN W. KLEIN, MD
DCMS PRESIDENT

The mission of the Dallas County Medical Society is to promote public health, advocate for physicians and their relationship with patients, while upholding professionalism in the practice of medicine.

Last month we said goodbye and farewell to our renowned and much loved DCMS Executive Vice President and Chief Executive Officer Michael Darrouzet. As most of you know, Michael is moving to Austin to assume the role of EVP/CEO at the Texas Medical Association. Perhaps his greatest attribute is he treated DCMS and the medical community at large like his family. We often spoke of the "Family of Medicine" referring to how DCMS brings different groups together. Michael recognized that our medical community is diverse and expanding and is dedicated to making the DCMS inclusive and representative, making us all stronger.

There are many branches of our "Family of Medicine" and I will try to recognize several here, so forgive me if I leave some out. There are several local medical organizations whose members are international medical graduates or who share an ethnic or cultural background. In 2018, the DCMS Board of Directors approved the creation of the DCMS Committee of International and Affiliated Medical Societies. One of the reasons the committee was created is to foster greater collaboration between our organizations, so that DCMS can embrace greater diversity among our membership, as well as strengthen our mission to improve public health, and promote professionalism in the practice of medicine. DCMS recognizes the C.V. Roman Medical Society, the Ismaili Health Professional Association, the North Texas Latin American Physicians Association and the Texas Indo American Physicians Society, Northeast Chapter. Dr. Ruben Velez, chairman of the board and immediate past president, has been leading the effort to include all these groups in DCMS. Please let us know if others should be included.

I come from the branch of academic medicine. Most of us began our professional lives in some sort of academic setting but the majority of physicians transition to private practice or employment outside of academia once through with training. We are all familiar with the term "town vs. gown," but I believe this idea of competition is antiquated and should be put to rest for the greater good of our profession. Some may not realize that most academic physicians earn their living by seeing patients and generating income just like private physicians. Interestingly, in the past, academic membership in DCMS equaled that of the private community. Now, however, academic membership has fallen to around 30% vs. 70% for the private physicians. Perhaps the old perception that organized medicine only addresses private practice concerns has led to apathy among academics. I would argue this is far from the truth based on the evidence of the success of the TMA's agenda in the recent legislative session. The 2020-2021 budget includes an additional \$60 million for graduate medical education as well as \$52 million for women's health and \$50 million for mental health services. TMA also was instrumental in raising the legal age for purchasing tobacco products to 21. These wins are good for everyone, but especially academic medicine.

If demography predicts the future, surely women in medicine will be the largest and most important branch of our medical family. Now, fully 50% of medical students in Texas and across the country are women and Texas has been successful in developing women physician leaders at the highest levels. Recently, past TMA President Dr. Sue Bailey was voted President-Elect of the American Medical Association, the second Texas woman to have the job. And Dr. Diana Fite is our

new TMA President-Elect. To better address important women's issues such as health disparities, gender pay disparities, and sexual harassment, the TMA House of Delegates recently voted to create a Women in Medicine Section. September is "Women in Medicine" month and to celebrate the event, DCMS is sponsoring a get together at the home of former DCMS Board member Dr. Alexandra Dresel on September 26.

The last branch of our family I want to address is our young physicians. Recently we had our Annual Medical Student Dinner at the Frontiers of Flight Museum to welcome the newest members of our family. This is always a magical evening and it will do your heart good to come to next year's event and meet the future of medicine. Additionally, we at DCMS are doing our best to increase resident and fellow membership. Residency programs in Dallas that cover the cost of membership (\$30 annually) have virtually 100% participation, whereas programs that do not cover membership have only a 16% participation rate despite vigorous recruiting efforts. We are missing approximately 1,000 residents and fellows every year who could be members!

Lastly, we are working diligently to recruit the right EVP/CEO for DCMS. Michael is one of a kind and leaves big shoes to fill; however, we are confident we will have someone soon. Meanwhile, we are in good hands with DCMS COO Connie Webster acting as interim CEO. We will keep you updated. **DMJ**

“ If demography predicts the future, surely women in medicine will be the largest and most important branch of our medical family.



Kevin W. Klein, MD
DCMS President