At its annual awards banquet on June 23, 2012 WOMA’s first Distinguished Service Award was bestowed on five members, who along with others, spent hundreds of hours and hundreds of thousands of their own dollars to establish the Pacific Northwest University of Health Sciences College of Osteopathic Medicine. In recognition of outstanding accomplishment in advancing the science and art of osteopathic medicine, education and philanthropy, WOMA recognized Lloyd Butler, DO, Paul Emmans, Jr, DO, Peter Grimm, DO, Sean Mullin, DO, and Palmer Wright, DO.

In making the presentation, WOMA Executive Director Kathie Itter stated, “I believe it was in the Fall of 2004 when Dr. Loren Rex and I were invited to Yakima by Dr. Lloyd Butler to meet a new osteopathic neurosurgeon about WOMA’s support for what I thought was) the establishment of an osteopathic neurosurgery residency program. I remember being excited about having an osteopathic residency program in Washington, though I never thought our first program would be neurosurgery. We were led to a meeting room in an empty wing of the hospital. Soon Dr. Butler and Dr. Greg Mick entered the room along with others and we sat down to talk. If I thought that starting a neurosurgery residency was surprising, imagine my reaction to hearing that they wanted to start an osteopathic medical school. In Yakima!

They proceeded to tell us of their plans and asked if WOMA would support such a venture. Knowing that WOMA pretty much runs on a beer budget, and knowing that medical schools can be bottomless pits when it comes to funding, I pondered their definition of support. After the reality of the idea sunk in, I invited them to present it to the WOMA board and offered my full moral support. The rest is history.

Looking back and knowing what I know now, it takes people with incredible will and fortitude to undertake such a daunting task. We are not talking about a branch campus of an existing school. We are talking about a medical school built from scratch.

With its founding, the university and its college of osteopathic medicine became the Pacific Northwest’s first new medical school in 60 years. It will substantially increase the number of new practicing osteopathic physicians each year and prepare a new generation of doctors to serve the five million at-risk people in the area’s underserved communities.

Tonight we have chosen to recognize five WOMA members who, among others, spent hundreds of hours and thousands or more of their own dollars to get this school to where it is today – an accredited osteopathic medical school that just graduated its first class. Two of our honorees are here tonight: Sean Mullin served as a founding board member from 2005 to 2010; Lloyd Butler was also a founding board member until he assumed the office of interim president in 2009. Those who could not be with us tonight are: Palmer Wright, who served as a founding board member from 2005 to 2010; Paul Emmans Jr was also a founding board member and has served the board since 2005. He is now on a medical mission in Kenya. Peter Grimm joined the board in 2007 and continues to serve.”

Congratulations to the first recipients of WOMA’s Distinguished Service Award.
2013 WOMA Board Elected

At its annual membership meeting on June 22, 2012, the WOMA membership elected its 2013 leadership. The officers will assume their duties on January 1, 2013. Incoming president, President Marc Cote, DO is considering committee appointments. There are openings on the Public Affairs Committee and the CME Committee for which he is seeking interested members. The Public Affairs Committee meets monthly with the Executive Committee at 7:00 p.m. at the WOMA office in West Seattle (phone conferencing is available) and attends quarterly Board of Governors meetings usually scheduled in conjunction with a WOMA seminar or convention. The CME Committee will meet next on Friday evening, September 21st at PNWU to select the topics for WOMA’s 2013 CME programs. Subsequent meetings may be needed either in person or by conference call. If you are interested in participating on either of these committees, please contact Kathie Itter at the WOMA office at 206-937-5358 or kitter@woma.org.

WOMA’s 2013 Executive Committee is President Marc Cote, DO, President-elect Scott Fannin, DO, Vice President Harold Agner, DO, Secretary Mark Hunt, DO, Treasurer Steven Leifheit, DO and Immediate Past President Lyndsey Rasmussen, DO.

Trustees elected for two-year terms beginning January 1, 2013 are District I – Mischa Coleman, DO; District II – David Farrell, DO; District III Mike Quirk, DO; District IV Paul Emmans, Jr, DO and District V David Hofheins, DO. Robyn Phillips-Madson, DO will serve as the Institutional Representative and Nicole Breen will serve as the PNWU Student Representative.

AOA delegates for 2013 are Harold Agner, DO, Paul Emmans, Jr, DO, Paul Emmans III, DO, Lindy Griffin, DO, David Lukens, DO and Robyn Phillips-Madson, DO. Alternates are Scott Fannin, DO and Amber Figueroa, DO.

WOMA Welcomes New Members

At its meeting on June 20, 2012, the WOMA Board of Governors approved the following applications for membership:

**Active**
Amy Anderson, DO AZCOM’05
G Kirk Gastineau, DO OSU-COM’82
Samuel Joseph, DO PCOM’79
Paula Renzi, DO PCOM’07

**Post Graduate**
Cynthia Mayer, DO COMP’97

**Student**
Shawn Allman, PNWU’16
Erika Bjorkland, PNWU’16
Sheri Finn, PNWU’16
Kyle Moore, PNWU’16

Getting to Know You

WOMA is pleased to welcome the following new active members:

**Amy Anderson, DO** graduated from AZCOM in 2005. Her postgraduate training took place at the University of Louisville Medical Center. Her practice focus is general medicine and mental wellness with some comprehensive chronic pain management and she is located in Silverdale.

**Glenn Kirk Gastineau, DO** is a 1982 graduate of OSU-COM. He completed a general internship at Oklahoma Osteopathic Hospital and practices family and geriatric medicine in Longview.

**Samuel Joseph, DO** graduated in 1979 from PCOM. He completed a rotating internship at Letterman Army Medical Center in 1980 and a Fellowship in Pulmonary and Critical Care Medicine at Walter Reed Army Medical Center in 1987. He practices Pulmonary, Critical Care Medicine in Spokane.

**Paula Renzi, DO** is a 2007 graduate of PCOM. She received her postgraduate training at Lankenau Hospital (Mainline Health). She practices Internal Medicine in Yakima.

Meeting Notice
Saturday September 22
WOF Board
5:30 p.m.

WOMA Board Dinner
6:00 p.m.

PNWU
Cadwell Student Center
3113 Inspiration Drive
(on PNWU Campus)
200 University Parkway
Yakima, WA

Page 2 Summer 2012  Washington D.O.
The PNWU-COM class of 2012 graduated 69 DOs on May 12. One hundred percent of the class matched successfully to postgraduate programs. Twenty-six went into family medicine, with 66% of the class going into primary care residencies. Orientation for the class of 2016 starts August 7th. Keith Watson, DO took over as PNWU President on July 2, 2012, and will be the keynote speaker at the class of 2016’s White Coat Ceremony at the Capitol Theatre in Yakima, August 11th at 10am. PNWU-COM is now fully accredited and has “.edu” status. Please visit the website at www.pnwu.edu.

The school hosted a public ground-breaking ceremony for the $5 million PNWU-COM Update Phase II addition to Butler Haney Hall on June 12th. This will add 22,000 sq. ft. to the university’s main academic center, including two large auditorium classrooms and offices. The project is slated to be finished by summer, 2013. The expansion will accommodate more student and staff services and further prepare PNWU to expand enrollment in the future. An increase in class size to 135 will be requested in December.

The college currently has core rotations in Anchorage and Fairbanks, AK; Blackfoot and Boise, ID; Billings and Great Falls, MT; Portland, OR and Centralia, Mt. Vernon, Puyallup, Spokane, Tri-Cities and Yakima, WA. Family Medicine residency programs formally started July 1st in Puyallup, Mt. Vernon and Yakima/Ellensburg. Mt. Vernon is also the site of a new Internal Medicine residency program. If you know of a potential training site, PNWU staff are prepared to provide the information necessary to determine the feasibility of a core rotation or residency program. Contact Juan Acosta, DO, PNWU Assistant Dean of Postgraduate Medical Education, at jacosta@pnwu.edu, regarding residency programs, and Anita Showalter, DO, PNWU Assistant Dean of Clinical Sciences at ashowalter@pnwu.edu, for medical student rotations.

The inaugural class of 2012 and faculty at graduation ceremonies on May 12, 2012

Keith Peterson, DO, PNWU Class of 2012, provides a commencement address.

Foundation News

The Washington Osteopathic Foundation (WOF) was created in 1970 to support osteopathic education and training in Washington State. Unlike many osteopathic foundations that started from the sale of osteopathic hospitals, the WOF began with a few hundred dollars donated by various members in memory of Floyd Smith, DO, who died in a hunting accident.

Forty-two years later, the Foundation has current assets of $471,000. Of that, $271,000 has been lent out in low-interest student loans which will be repaid into the fund for future loans. (Over the last year, ten $10,000 loans were granted. Requests are up by 100% over the previous three years combined.)

Of the current assets, $47,000 is in the Warren Lawless Scholarship Fund and $40,000 is in the Eugene Imamura Scholarship Fund. Before the economy recessed, each scholarship fund generated enough to award a $1,000 scholarship every year. This year the board awarded two $1,000 Lawless scholarships, which are based more on community service and one $1,000 Imamura scholarship, based on need. Until the economy recovers and these accounts can generate sufficient interest and dividends, donations will be needed to make up the difference.

Three years ago the WOF established a $10,000 Loan Bridge Fund at PNWU to assist students who run out of funds for rent, groceries, utilities, etc. before they receive their federal loan disbursements. The fund is replenished when the students get their loans. The need was so great that the Foundation doubled it last year. This last twelve months the fund was accessed by 27 students who borrowed and paid back almost $50,000.

The Washington Osteopathic Medical Association hosts two fundraising events each year to benefit the Foundation. During the annual convention each June an auction is held. This year over $10,000 was raised—enough for one loan. The second event is the WOMA Fall OMM Seminar held at the Pacific NW University of Health Sciences Butler Haney Hall in their beautiful OMM lab. The proceeds from that seminar will go to the Foundation. If you would like to attend a great OMM CME program and support osteopathic training you may register or print out a registration form at www.woma.org.

If you are unable to attend the seminar but would like to support this worthwhile cause, tax-deductible contributions are welcome any time. There is a contribution form you may print out at www.woma.org on which you may make a contribution in honor or memory of a colleague or loved one.
Convention Activities

Clockwise from top left: Drs. Phillips-Madson, Griffin and Dawson and spouses enjoy the auction; Rosemary Lukens and President Lindsey Rasmussen serve as the "Vanna's" of the auction; Auctioneer Scott Fannin and guitarist/songwriter rDan Wolf lead the audience; President-elect Marc Cote presents Dr. Rasmussen with the Presidential Plaque; DO families enjoy the annual bonfire making s'mores.
Left: Sharon Cathcart celebrates her auction purchase in song. Right: President Lyndsey Rasmussen presides over WOMA’s annual meeting. Below: Registrants enjoy the new larger classroom complete with wi-fi and an electronic syllabus.

Above middle: Members enjoy an evening with old and new friends; Above bottom: Dan Wolf instructs the audience on the songs to be sung to encourage auction bids; Left: Officers and members review the minutes of last year’s meeting.
Membership Recognition

Friday night dinner is a time for networking and conversation.

Dick Richards, DO 45 years

John Hunholz, DO 52 years

Tom Summe, DO 44 years

David Lukens, DO 45 years

Dwight Williamson, DO 49 years

Terry and Sean Mullin, DO enjoy dinner with John Allen, DO

John W Fuchs, DO 41 years
Good food, great company, a little wine and a healthy dose of generosity makes for a successful auction. If you really want to have an evening of laughs and fellowship, plan to attend next year at WOMA’s 100th Annual Northwest Osteopathic Convention, June 20-23, 2013 at Semiahmoo.

Recorder Ginny Hunt keeps close tabs on the bids.

Who wouldn't want to bid on the leg lamp from "A Christmas Story"?

Tom Dawson checks out the Stetson modeled by Rosemary Lukens.
Health care delivery continues to undergo massive changes that affect patient care and your economic future to one degree or another. The extent and manner of change as it affects us individually and as a professional family is most directly controlled by public policy conceived in the Legislative process and in regulatory agencies of the federal and state government.

The changes made can prove to be adverse or beneficial to the interests of the osteopathic profession. Which label applies depends entirely on the level of our interest and participation as a concerted group as well as individual advocates of a profession-wide position on each issue. Like it or not, a major part of our participation must be financial support of those legislators who have demonstrated friendliness to the needs and interests of osteopathic medicine. If they are not in office, they can’t help us.

A good example is this year’s House Bill 2020 requiring DOs and other providers to have six hours of CME in Suicide Assessment and Treatment. WOMA testified that Osteopathic Physicians are well-trained in suicide assessment and prevention. Mandating CME on this topic would be done at the expense of CME that physicians would choose to better treat their specific patient population. The Legislature charged the boards and commissions with establishing and administering requirements for CME as may be necessary or proper to ensure public health and safety as a prerequisite to granting and renewing licenses. WOMA recommended that the Legislature leave the decision on required CME for suicide assessment and prevention to the Boards and Commissions and consider instead a public awareness campaign with help from the media. This, along with the testimony of others convinced the Legislature to remove DOs and several other professions from the CME requirement.

The osteopathic profession formed the Washington Osteopathic Physicians and Surgeons Political Action Committee (Osteopac) several years ago to provide the profession with an avenue to support candidates for the Washington State Legislature. Membership is strictly voluntary but essential to your own self-interest. Osteopac can assure maximum impact from your political contributions.

This is an election year and your donations are needed to support worthy candidates for office. The funds are also used to support DO Day in Olympia which is scheduled for February 22, 2013. To join, go to www.woma.org and select Osteopac under the Legislation tab. Complete and print out the form and submit with your personal check.

And, if you haven’t already done so, establish contact with your elected representatives and ask them to consider you a source when developing health care legislation and policy. Legislators want to hear from their constituents. Be sure to vote on August 7th and November 6th. Your voice matters!

Medical Assistant Credentials Created

ESSB 6237 (2012) creates the new medical assistant profession and phases out the health care assistant profession. Rules are needed to clarify the transfer of current health care assistants to medical assistants and specify minimum qualifications for a medical assistant-certified, medical assistant-hemodialysis technician and medical assistant-phlebotomist. Rules will define approved training programs and exams along with minimum requirements necessary for a health care practitioner, clinic, or group practice to endorse registered medical assistants. Rules are also needed to further define scope of practice and types of drugs that may be administered by a medical assistant and set fees.

Interested parties are encouraged to join the ListServ which can be accessed at http://listserv.wa.gov/cgi-bin/wa?A0=MEDICAL_ASSISTANT or at http://listserv.wa.gov/cgi-bin/wa?A0=HEALTH-CARE-ASSISTANTS.
The AOA held its annual business meeting in Chicago, Illinois from July 20 to July 22, 2012. Physician and osteopathic medical student membership now exceed 100,000. Fifty divisional societies and 23 specialty colleges were represented by 528 delegates and alternates. WOMA was represented by Drs. Dave Lukens; Paul Emmans, Jr.; Lindy Griffin; Paul (PJ) Emmans, III; Robyn Phillips-Madson; Harold Agner, and our PNWU student representative Steve Pinther. Committee assignments were as follows: Robyn Phillips-Madson, Public Affairs Committee; Harold Agner, Ad Hoc Committee; and Paul Emmans, Jr. chaired the Resolutions Committee.

The Annual Report of the AOA was presented by Executive Director, John Crosby, JD. Highlights of his presentation are summarized below, with additional details available at http://www.osteopathic.org/inside-aoa/about/leadership/Documents/2012-AnnualReport.pdf

1) a new AOA application is available for iPads and smart phones with the Apple or Android operating systems to keep members up-to-date
2) the AOA’s “Are We There Yet” campaign combines awareness efforts for OCC, CAP for PQRS, and CME reporting deadlines.
3) the AOA Clinical Assessment Program (CAP) has been expanded during the past year. CAP for Physicians is aligning with at least two AOA certifying boards to implement osteopathic continuous certification (OCC).
4) the AOA and the American Association of Colleges of Osteopathic Medicine have joined efforts to address the rapidly changing environment of osteopathic medical education, envision the future needs of the U.S. health care system, and make recommendations on how osteopathic medical education can transform itself to address those needs.
5) the AOA will host a webinar on the Clinical Assessment Program (CAP) on Sept. 19, 2012, to inform physicians on how to meet the deadline for participation in the Medicare economic incentive program.

132 resolutions covering a variety of topics were presented before and discussed by members of the Ad Hoc, Professional Affairs, Educational Affairs, Public Affairs, and Constitution and Bylaws Committees. The Joint Board/House Budget Review Committee reaffirmed the need for an AOA Cost of Living Dues Increase for Fiscal Years 2013 and 2014. Resolutions were then brought before the body of delegates for action. After two days of deliberation, the house approved 118 resolutions (34 with amendments), disapproved 5, and referred 5 to other bodies within the AOA for further action. Four resolutions were withdrawn by their submitting organizations before consideration.

Ray E. Stowers, DO, was sworn in on July 21st as the 116th President of the American Osteopathic Association by his predecessor Martin S. Levine, DO. President Stowers inaugural address was entitled “Ahead of the Curve”, expounding the importance of preparing for the changes which are occurring in health care delivery and reimbursement. Norman Vinn, D.O. was elected President-elect on Sunday, July 22nd.

**A New Delegate's Perspective**

*I was much honored to represent Washington State’s Osteopathic interests at the National AOA House of Delegates. I arrived Thursday evening in time for the WOMA dinner where we discussed various resolutions and determined who would attend which reference committees. Friday morning was spent in the new delegate’s orientation, followed by the House of Delegates Reports. The noon-time was spent in an AOA awards luncheon honoring service to the profession in various capacities. The afternoon was spent in the education reference committee. There were several resolutions of interest to me. One was regarding alternative funding for GME programs. This was an effort to prepare for the possibility of thinner government funding. We did some word-smithing on this resolution before it went to the floor. A great deal of time was spent on a resolution that attempted to loosen the requirement that board certification be tied to an unlimited license. Such that for physicians who are in recovery of some sort, their certification would not necessarily be in jeopardy. There were a number of other resolutions germane to medical education such as the chart for the AOA to examine the development of primary care ambulatory residency training programs, and another resolution to increase the number of fellowship positions available for DO graduates. There were a couple of resolutions related to CME as well.*
In Memoriam

Arthur Allen Clevenger, DO, age 88, passed away on the afternoon of November 10th, 2011, at Yakima Regional Hospital, surrounded by his family.

Dr. Clevenger, known by friends as Art, was born August 10th, 1923 in Lawrence, Kansas, to Louis Edgar and Berdina (Kinkead) Clevenger. After graduating from Salina High School, he enrolled in the Air Force. On his birthday in 1947, Art married Virginia Mae’ Monahan in Salina, Kansas. He graduated from the University of Kansas School of Pharmacy in 1950, and practiced pharmacy in Arizona until he returned to school at the Des Moines Still College of Osteopathy and Surgery, receiving his doctorate in 1958. Upon completion of his medical internship in Tulsa, Oklahoma, Art, Virginia and their young daughter moved to Sunnyside, WA, in 1959, where he joined the practice of Dr. A.E. Borchardt. They, along with Dr. P.J. Swofford and Dr. G.A. Dierdorff, were founders of Sunnyside General Hospital. Throughout his 32 years as a primary care physician, Dr. Clevenger cared for and touched the lives of his many patients. During his career, he served on many state and local medical groups, including the State Osteopathic Licensing Board. He was a member of the Sunnyside Community Hospital Board of Trustees from 1988 to 2006. After retiring from private practice, he continued to work shifts in the emergency room, and was a director of the Mattawa Clinic.

O. Keith Pauley, DO, FACOFP
April 16, 1916 - December 20, 2011
Born on family farm near Powersville, Missouri to Isal Mary (Moore) and Everett Otto Pauley, he worked from early years at variety of jobs to assist his family, fund his and his sister’s education and help any friend in need.

These traits continued after receipt of medical degrees and relocation to Mason, Michigan in 1941 where Dr. Pauley and his wife Ruth M. (Torres) Pauley became deeply involved in local/regional/national organizations until partial retirement in 1986 and a move to Seattle, Washington to be with their daughter and granddaughter. There he continued his medical affiliations as non-practicing consultant; educator; charitable and volunteer organization member, advisor to family and friends, while playing competitive tennis until his 90th birthday. He graduated in 1933 from Unionville (Missouri) HS and received his D.O. degree from KCOM (Kirkville) A.T. Still University in 1941. He was a Fellow of the American College of Osteopathic Family Physicians and served as president of that organization in 1962-63. He was part of ACOFP/AOA efforts that resulted in full licensure and equivalency with allopathic (MD) degrees, and by 1973 all 50 states and D.C. granted DO degrees full practice rights. Though entitled to MD, he preferred DO.

CMS Proposes 7% Primary Care Payment Increase

The Centers for Medicare & Medicaid Services (CMS) has issued a proposed rule under the 2013 Medicare Physician Fee Schedule that would increase payments to family physicians by approximately 7% and other practitioners providing primary care services between 3%-5%. In 2013, CMS is proposing for the first time to explicitly pay for the care required to help a patient transition back to the community following a discharge from a hospital or nursing facility.

The rule would also continue implementation of the physician value-based payment modifier included in the Affordable Care Act; include additional Medicare-covered preventive services on the list of services that can be provided via an interactive telecommunication system; collect data on patient function to improve how Medicare pays for physical and occupational therapy; and speech language pathology services, among other provisions.

L&I Providers Must Re-Credential

This is a reminder for those who want to continue treating injured workers in 2013. As of January 1, 2013, providers must be enrolled in the new L&I network with an approved provider agreement treat and receive reimbursement for care to injured workers in Washington State beyond the initial office or emergency room visit.

A non-network provider is not authorized to treat and will not be reimbursed by the department or self-insurer for services other than the initial office or emergency room visit. The following services are considered part of the initial office or emergency room visit: (i) Services that are bundled with those performed during the initial visit where no additional payment is due (as defined in WAC 296-20-01002); and (ii) In the case of an injured worker directly hospitalized from an initial emergency room visit, all services related to the industrial injury or illness provided through the hospital discharge.

A non-network provider must refer injured workers to network providers when additional treatment is needed, and must providetimely copies of medical records to the other provider.

Medical providers may apply online at www.jointhenetwork.lni.wa.gov.

DOH Proposes HEAL-WA Fee Reduction

The Department of Health is proposing rules to reduce the surcharge for certain professions to access HEAL-WA online web portal through the University of Washington. If approved, the annual HEAL-WA access fee for osteopathic physicians and DO PA’s would be reduced from $25 to $16.

The proposed rules were filed with the Office of the Code Reviser in July 2012 and are expected to take effect November 1, 2012. A public hearing is scheduled on August 27, 2012. Additional information may be found on the department’s fee webpage. If you have any questions, please contact the department’s Customer Service Center either by telephone at 360-236-4700 or by email at hsqa.csc@doh.wa.gov.
Dr. Tettambel Elected to AAO Board of Governors
Melicien A. Tettambel, DO, FAAO, of Yakima, Wash., was elected to a three-year term on the Board of Governors at the annual business meeting of the American Academy of Osteopathy (AAO) during the AAO Convocation in Louisville, Ky., March 22.

Dr. Tettambel is a 1978 graduate of Kirksville College of Osteopathic Medicine. She currently serves as Chair of the Department of Osteopathic Principles and Practices at Pacific Northwest University of Health Sciences College of Osteopathic Medicine. She is also a visiting professor and lecturer at several other colleges of osteopathic medicine. She is certified by the American College of Osteopathic Obstetricians and Gynecologists (ACOOG) and the American Osteopathic Board of Special Proficiency in Osteopathic Manipulative Medicine.

Dr. Tettambel is a Past President of the AAO, and currently serves on its Board of Governors and as Chair of the American Osteopathic Board of Neuromusculoskeletal Medicine. She is President of the Sutherland Cranial Teaching Foundation, and is also actively involved in the American Osteopathic Association, ACOOG and the Osteopathic Cranial Academy. She was the 2004 recipient of the AAO’s A.T. Still Medallion of Honor and is co-author of Osteopathic Management of the Female Patient.

On Line License Renewal Available
As of July 16th, 2012, Osteopathic Physicians & Surgeons, Osteopathic Physicians & Surgeons Limited and Osteopathic Physician Assistants may renew their licenses online. The Department of Health (DOH) is rolling out implementation of online renewals in multiple phases. If your profession is currently not on the list, please do not wait to renew as this may result in your credential expiring.

DOH has implemented a $2 convenience fee. This fee is per online transaction. If you renew multiple licenses in one transaction, you will be assessed one fee only. However, if you do multiple transactions, you will be charged a convenience fee for each transaction. This amount will be charged in addition to your renewal amount. NOTE: Your receipt will not reflect the convenience fee.

While the online renewal process is more convenient for their customers, it does not reduce agency costs. DOH will continue to mail renewal notices and licenses to credential holders. The current renewal process is already mostly automated; therefore, this new optional system will not decrease staff time. The purpose of convenience fee is to help cover costs of making the online system available and credit card processing.


You will not be able to renew online if:
· Your credential has already expired.
· You are currently in any other status such as military, inactive, or retired.
· You want to change your status from active to military, inactive, or retired.
· You have an address change.
· You have a name change.

Please contact the Customer Service Office at 360.236.4700 for assistance.

Is your contact information current?
DOH must have your current mailing address in their system for you to renew online. They mail your updated credential to the address on file. The United States Postal Service will not send your credential to a forwarding address.

If your contact information is not current in the system, please complete and submit the address change form. Please include a valid email address.

Contact DOH prior to online renewal to make sure your contact information has been updated.

CME Committee Members Needed
The WOMA CME Committee is in need of more members to plan future programs. CME is not as simple as it used to be and there are many more requirements now for accreditation that must be met. Members use information obtained from evaluations of previous programs, needs assessment surveys, evidence-based resources such as web and journal articles, CDC and DOH statistics and community need to determine the overall topics and individual presentations offered at the annual convention and the Spring, Fall and Summer seminars.

The Committee meets in person and by conference call at least once a year with most of the follow-up work done by email. Committee members rotate as seminar program chairs and moderators and all committee members participate as moderators for the annual convention program. Primary care and specialists are welcome and encouraged to participate. The next CME Committee meeting is scheduled for Friday, September 21 at 7:00 p.m. at the Pacific NW University of Health Sciences Cadwell Student Center in Yakima. If you are interested or would like more information, please contact Kathie Itter at 206-937-5358 or email kitter@woma.org.

Update Your Record
We know you’re busy. That’s why your Washington Osteopathic Medical Association (WOMA) wants to make staying informed easy by delivering association information and health care news that affects your practice directly to you. We can only do this if we have your current contact information, so please make sure your record is current. Please pay close attention to your email address as it is the quickest and most cost-effective way to contact you with time-sensitive issues such as state agency, licensing and legislative activities. Members can go to www.woma.org and log in using the email address provided to WOMA and your password.

Not a member? We’d love to have you join us. Go to www.woma.org and select Join WOMA under the Membership tab. Print out the application form and submit to WOMA. PO Box 16486, Seattle, WA 98116-0486. If you need assistance, email kitter@woma.org or call Kathie Itter at 206-937-5358.
We were just headed for the cook house for lunch and now that we are well fed it is time to get ready for the matinee. The first thing that happens is that the “Ticket Wagon” opens on the “Midway”. At this point most folks are confused and think that the circus and a carnival are the same. In fact they are in no way similar and they tend to hold each other in disdain for a variety of reasons. Next the “Joints” open for business. The number one joint sells popcorn, snow cones, and coke and is the largest on the midway. Next is the number two joint that sells Cotton Candy and Candy Apples, a confection that is truly the work of the Devil. Caramel apples aren’t too bad, just melt some caramels put the apple on a stick and roll the apple in the goo. Candy apples on the other hand cannot be made by any human that has been assigned the task. The temperature must be exact and it never is so I generally found a reason to not even try.

Next the “Side Show” opens up for the “come on” to try and get a few extra dollars. In fact it cost a quarter for adults and a dime for kids, by getting people in to see the “Wild Animals” from around the world. According to the “Barker” this was a family show and we had no “freaks, monstrosities, or flop eared people” inside the tent. There was also precious little else to see. When I worked the side show, I would sometimes “eat fire” on what is referred to as the “Bally Platform” in front of the tent and then do the act again inside the tent. I also did a torture board act where I laid on a bed of nails lifted an anvil and placed it on my chest, then had one of the “Roustabouts” who knew a sledge hammer from a chest, then had one of the “Roustabouts” who knew a sledge hammer from a rubber mallet, strike the anvil to “gasps” from the crowd and relief from me that he hit the anvil.

The start of the show always features all of the performers and whatever other people can be coerced into putting on wardrobe parading around the tent in a spectacle to impress the crowd on what they are about to behold. On the show this is referred to as “Spec” and is almost universally hated. For the performers, referred to as “Kinkers”, it often represents an extra wardrobe change and for many others it is something they would rather not do in the first place. However, for the crowd, known as “Marks” or “Towners” it is the beginning of a transformation from the work-a-day world to one of fantasy and spangles and little children lost in their own world. This last feature makes it much easier to sell some item to the proud parents of said child.

There follows a world of acrobatics, dog acts, (my brother was the owner of without a doubt the worst dog act ever seen) animal acts, trapeze performances, lovely ladies doing aerial acts, and in between the ever popular clowns. Clowns may be popular with the crowd perhaps, but not always popular with the rest of the show folks. Depending on the number of times Management felt they could get away with the same people appearing in different acts, the show lasted between two and three hours. This allowed for the “Candy Pitch” which was the selling of prize packages containing a few salt water taffies and a prize of some sort. My brother Charles made the pitch and I sold the packages. I made a nickel a package and had days when I made over one hundred dollars: do the math! It was a good thing the show was only there for one day.

This scenario was repeated another time for the “Main Performance” and finally it was time for teardown. The midway was usually open for “Blow off” while the “Big Top” was being torn down and put away on the trucks for the trip to the next town. On nice nights when there are kids that help after the show this is an interesting thing to watch. When it is raining and miserable, there is no “Romance of the Circus” anywhere to be found. You wind up getting the “Kinkers” to help fold and roll the tent and they are less than enthusiastic. Finally when it is all done, it is time to head for the “grease joint” or “Pie Car” depending on the show. Here you can acquire a sandwich and a beer, and talk over the day or whatever. However, be forewarned, a common sandwich is the “Pork Shoulder Sandwich” truly a savory creation. It is made up of white bread, sandwich spread, called “flookum”, on the show, crispy pork shoulder steak and bone. That’s right the bone is left in. The “First of May’s”, which is what rookies are called, become adept to gnawing around the bone very quickly and normally don’t lose too many teeth.

And so we come to the end of a day that started about 5 A.M. and it is now close to Midnight so time to go to bed. The “Kinkers” and Management have been in bed for a couple of hours and the animals will be quiet until about 2:30 A.M. when they will all sound off about something and then settle back in for the rest of the night. It has been fun writing down these memories for you and I hope you have enjoyed them.

Looking back over my life it has been an interesting trip. Where the Hell the time went I have no idea. It is hard to believe that 53 years ago I was a “First of Many”. Sometimes it is even harder to think that I graduated from K.C. 43 years ago. Life has been good and everyday it gets better. My favorite day has always been tomorrow. 

New Schools

Three new colleges of osteopathic medicine will seat their first class in 2013.

- Alabama College of Osteopathic Medicine (Dothan, AL)
- Campbell University School of Osteopathic Medicine (Buies Creek, NC)
- Marian University College of Osteopathic Medicine (Indianapolis, IN)
- Paul Evans, DO, Vice President, Founding Dean

With the addition of these new schools, there are now 29 U.S. colleges of osteopathic medicine (COMs), four branch campuses, and four additional teaching locations. Currently, more than 20 percent of medical students in the United States are earning their degrees at one of the nation’s COMs.