

WHAT'S HAPPENING IN_IN_

Volume XVII, Number 4/June-July 1997

Come to Chicago for AMWA's 82nd Annual Meeting

Make plans now to join more than 800 of your colleagues at AMWA's 82nd Annual Meeting, November 4-9, 1997 in Chicago, Illinois. This year's theme is "Women Empowering Women: The Female Face of Medicine." The meeting will be held at the elegant Fairmont Hotel which is located near Grant Park.

We urge you to come and hear Ellen Malcolm, Founder and President of EMILY's List, who will be the keynote speaker on Thursday, November 6. EMILY's List, which is short for Early Money Is Like Yeast— it makes the dough rise, was founded in 1985 with the goal of electing more women to the U.S. Senate and House of Representatives and as governors. Ms. Malcolm will address the impact women advocates can have on the political process and discuss how EMILY's List has grown to become the Nation's biggest source of contributions for federal candidates.

Among the notable speakers confirmed for the Saturday, November 8, plenary session are Carol Aschenbrener, MD, Senior Scholar in Residence with the Academic Health Centers in Washington, DC, who will discuss "Leadership in Health Care for the 21st Century: Combining Masculine and Feminine," and Debra Roter, DrPH, Associate Chair of the Johns Hopkins University Department of Health Policy and Management, who will address the "Effects of Gender on Physician Communication."

AMWA Award Winners

Awardees to be recognized at this year's annual meeting include LeClair Bissell, MD, CAC, recipient of the Elizabeth Blackwell Award, which recognizes a woman physician who has made the most outstanding contribution to the cause of women in the field of medicine; Christine E. Haycock, MD, winner of the Bertha VanHoosen Award honoring exceptional leadership and service to AMWA; Marie P. Glanz, recipient of the Camille Mermod Award, given to a non-physician who has rendered exceptional service to the Association; and Olga Jonasson, MD, Woman in Science Award winner, who has made exceptional contributions to medical science.



Chicago's towering skyline will serve as the backdrop for AMWA's 1997 Annual Meeting. Courtesy of the Chicago Convention and Tourism Bureau.

More than 45 educational workshops will be offered during the 4-day meeting on a wide range of issues, from career development and computer technology to scientific and clinical updates in key areas of women's health. Attendees will not only have the opportunity to network with leading women physicians and medical students from across the country but also to learn about the latest advances in women's health care delivery through workshops and more than 40 industrial and scientific exhibits on Friday and Saturday. Members are urged to become more active in AMWA's projects and activities and to share their ideas by attending the Board of Directors' and Committee meetings held during the Annual Meeting.

Meet AMWA's leadership and celebrate the inauguration of Sharyn Lenhart, MD, as 1997-1998 AMWA President at the President's Banquet set for Saturday evening at the John G. Shedd Aquarium, which features an exotic array of aquatic life from around the world. Banquet guests will tour the Oceanarium prior to dining amid the splendor of a Coral Reef Exhibit.

More information about the 82nd Annual Meeting will be included in the Preliminary Program, which will be mailed in late June. If you have any questions, please call Gwen Miller, RN, Meeting Consultant, at 703-838-0500; email: gmiller@amwa-doc.org.

PRESIDENT'S MESSAGE

AMWA's Strategies and Plans for Action

Debra R. Judelson, MD President judelsondr@amwa-doc.org



In the last newsletter, I discussed AMWA's new vision statement, developed as a description of why we exist in terms of the impact our association will have on the "greater community" around us. Our mission statement was rewritten to define who we serve and explain our primary purpose.

AMWA's Vision Statement: The American Medical Women's Association empowers women to lead in improving health for all within a model that reflects the unique perspective of women.

AMWA's Mission Statement: The American Medical Women's Association is an organization which functions at the local, national, and international levels to advance women in medicine and improve women's health. We achieve this mission by providing and developing leadership, advocacy, education, expertise and mentoring, and strategic alliances.

The above list details strategies which can be used to develop our goals and plans for action. Drafting goals and action plans has always been the difficult step for an organization, and AMWA is no exception. We need to look at each strategy, identify realistic goals, and determine how our interests can impact each one.

For example, if we focus on the strategy of leadership, our goals might be to increase participation of local leaders at the national level, to develop methods to promote women physicians into leadership positions, and to expand the speaker's bureau and master faculty. For the Women's Health Committee and its Sub-Committees, the action plan may identify AMWA experts on particular topics and match their availability for participation in conferences or advisory positions or for the development of curricula. For the Leadership Development Committee, the Professional Development Committee, and the Mid & Advanced Career Issues Sub-Committee, the action plan may include a survey of members on their expertise in health care areas and willingness to relocate for job placement opportunities. For the Membership Committee and Regional Development Task Force, the action plan may direct national leaders to go back to their local branch or region and identify a member (or potential member) capable of taking over their national responsibilities and challenge them to the task.

For the strategy of advocacy, our goals may be to develop activities that address specific workplace issues for physicians, students, and residents; to position AMWA as the unique voice for women's health through effective communication and choice of topics; and to take legislative action on behalf of our members and issues. For the strategy of education, our goals may be to position AMWA as the definitive resource for education in women's health for the medical profession or in women's health for the general public and/or to educate our members about women's health issues to establish a discernible fund of knowledge conferred by AMWA membership. For the strategy of expertise and mentoring, our goals may include expanding informational resources, establishing a more functional women's health committee, and increasing involvement of all AMWA members in committee work via improved access outside of meetings and open invitations. For the strategy of strategic alliances, our goals may be to build, develop, and strengthen strategic alliances with professional and educational organizations, government, corporations, foundations, and the media; to develop a core group of goals over which alliances can be built; and to develop targeted legislation to use for partnerships with other groups.

Each Committee chair and active members should look at the strategies and suggested goals so that they can craft their own plan of action. There will be considerable overlap, both between strategies and among committee members, as to which action plans to recommend. When all of the action plans are examined, there will be some obvious activities that AMWA should be involving in. This is where we should focus our efforts, our resources, and our staff.

Through this process, we may discover that what we have been doing all along accomplishes what we want for AMWA. More likely, we will see some recurring themes and major recommendations for change. These may include a new vice presidency for women's health, website publication of committee meeting minutes and workplans to provide all members with the opportunity to comment, focused staff meetings with new committee chairs and officers, and task-oriented invitations to new members. Whatever the recommendations are, our expectation is that this process will help AMWA evolve to be more responsive to our true needs and able to work with ALL of our membership. Please take the time to think about these strategies and what actions you would like to see AWMA take!

GRANT PROJECT UPDATE

Improving Reproductive Health....One Medical Student at a Time

The Reproductive Health Elective is making a difference! Responses from those who have used and taken the elective have been positive. Following is testimony from J. Mutt Dickson, a medical student at the University of Washington who recently took the elective:

I had received an email about the AMWA Reproductive Health elective offered in Atlanta and New Orleans, but hadn't acted on it by the deadline...I came across the email again and decided I wanted that kind of learning experience. Myself and two other students took the elective in Atlanta with Drs. Miriam Zieman and Bob Hatcher.

My experiences at Grady Hospital and the Fulton County Health Department were excellent. Dr. Zieman, the director of the family planning clinic and a professor in Emory's ob/gyn department, arranged for each of us to spend considerable time in clinics. We also had didactic conferences using the very helpful AMWA curriculum at least 4 days a week to complement our clinical experiences. All three of us caught Dr. Hatcher's enthusiasm and passion for emergency contraception, in addition to learning from his vast experiences in contraception education. Rarely has learning been so much fun! We three AMWA students felt honored to be taught by "the guru" of contraception.

The Fulton County Health Department's STD clinic was one of the highlights of my learning experience; it is a very busy clinic staffed with extraordinarily-talented clinicians who were very willing to teach "real world" STD care and prevention. The Grady teen clinic convinced me to spend a few moments talking about birth control and self-esteem with every teenage patient I see in my future practice. The nurses in the family planning clinic are very student oriented and sought us out for such procedures as diaphragm fitting and Norplant or IUD insertion.

Housing was available at a very low cost in the Grady student dorm and we had full use of the facilities at Emory University...I would highly recommend this elective to anyone, male or female, entering clinical medicine. AMWA has "done it right" with the curriculum.

The curriculum, which is available free to medical schools that offer the curriculum, may also be purchased through the National Office. AMWA appreciates the support of the John Merck Fund, which has generously contributed \$25,000 to assist AMWA in disseminating the elective.

Enhancing Health Care for Women

The Education Project on Coronary Heart Disease in Women has held 180 CME workshops and 24 lay workshops across the country. AMWA would like to thank the 30 AMWA physicians who volunteered to serve as master faculty. The faculty are to be commended for their contributions to improving the skills of physicians and enhancing the quality of care women receive.

AMWA's master faculty, who have traveled across the country to conduct sessions, include: Anne Blenke, MD; Willa Brown, MD, MPH; Eugenia Carroll, MD; Joanne Ceimo, MD; Libby Cone, MD; Patricia Davidson, MD; Linda Deere, MD; Diane Elliot, MD; Mary Fitzsimons, MD; Susan Fox, MD; Gerrie Gardner, DO; Linda Colle Gerrond, MD; Barbara Hall, MD; Catherine Henry, MD; Karen Hicks, MD; Joanne Holland, MD; Jane Howard, MD; Susan Ivey, MD; Debra Judelson, MD; Christine Mueller, MD; Leslie Poor, MD; Barbara Prian, MD; Nina Butwell Radford, MD; Deborah Robinson, MD; Ruth Rydstedt, MD; Julie Samuels, MD; Brenda Sexton, MD; Stanley Shapiro, MD; Rosalind Shorenstein, MD, PhD.; Susan Souther, MD; Susan Stewart, MD; and Valerie Ulstad, MD.

This immensely popular workshop has been held in 34 states, plus the District of Columbia and Canada. Workshop venues have included health fairs, HMOs, AMWA branch meetings, medical schools, and medical society meetings.

AMWA is now focusing on providing newly updated workshops to large, national audiences. In June, AMWA will present the CHD Workshop at the Congress on Women's Health, Washington, DC, the Disease Management Congress, NY, and Southern California Kaiser; in September 1997, of the annual Scientific Assembly of the American Academy of Family Physicians, Chicago, IL; and in November, at AMWA's Annual Meeting, Chicago, IL.

The curriculum has been updated and includes a revised diagnostic section and updated reference material as well as a new section on nutrition, which was developed with an unrestricted educational grant from the National Association of Margarine Manufacturers. The program is funded by an unrestricted educational grant from DuPont Radiopharmaceuticals, a division of the DuPont Merck Pharmaceutical Company, as part of its Difference in a Woman's Heart Program.

High Blood Pressure Information—The National Heart, Lung, and Blood Institute is making available a free consumer brochure "Cantrolling High Blood Pressure: A Woman's Guide." Please call 800-575-WELL or write Alliance for Aging Research, 2021 K St., NW, Suite 305, Washington, DC 20006 for copies.

GOVERNMENT AFFAIRS UPDATE

perroductive health issues remain at the forefront of the legislative agenda in the 105th Congress. Senator Daschle introduced a White House -backed initiative that would ban abortions in the final months of pregnancy unless a woman was threatened with death or narrowly defined "grievous injury" to her health. He described the latter term as "a severely debilitating disease or impairment specifically caused by the pregnancy" or "an inability to provide necessary treatment for a life-threatening condition." Both the Daschle initiative and an initiative introduced by Senators Boxer and Feinstein as substitutes for H.R. 1122/S. 6 would ban a particular abortion procedure (intact dilation and extraction). As of this writing, the House bill passed by a veto-proof margin and the Senate passed the bill but was short of a veto-proof majority. President Clinton said he would veto the bill because it does not include exceptions to protect women's health. Daschle's proposal and others are expected to be resurrected after the expected veto. AMWA criticized the AMA for its support of the bill and has urged the AMA to rescind its position.

AMWA's Executive Committee recently held a conference call to clarify AMWA's position on such legislation. The Committee expressed its grave concern with governmental attempts to legislate medical decisionmaking through measures that do not protect a woman's physical and mental health, including future fertility, or that fail to consider other pertinent issues such as fetal abnormalities. It is the opinion of the Committee that it is irresponsible to legislate a particular test of viability without recognition that viability cannot always be reliably determined and discussed such issues as the inexactness of fetal dating and the lack of complete information available in emergency situations. AMWA remains resolutely opposed to the levying of civil and criminal penalties for care provided in the best interest of the patient. Any forthcoming legislation will be reviewed in light of the issues raised above.

As a participant in the coalition "Strong Women, Inside and Out," AMWA has been working to gather support for H.R. 1002, which would set a national standard for Medicare coverage of bone mass measurement tests for those at risk for osteoporosis. For help in setting up your own grassroots effort in this area, please call 202-452-9420 or fax 202-296-3727 for a National Action Kit (which includes a videotape and advocacy guidelines).

For more frequent legislative updates and talking points, join AMWA's Legislative Network. AMWA is in the process of upgrading its communications capabilities so that we can send broadcast email and faxes. To join, please contact Anne Pritchett (aprit@amwa-doc.org) or Jackie Nichols (jnichols@amwa-doc.org).

Shaping AMWA Policy—Are there any health, medical, social, or political issues that you think AMWA should be addressing but isn't?

Members are urged to submit resolutions on issues affecting women, particularly women in medicine, for consideration at AMWA's Annual Meeting. Resolutions must be submitted by August 29, 1997, to Anne Pritchett at the National Office (aprit@amwa-doc.org).

AMWA Takes on Big Tobacco

To date, Philip Morris' new promotion—Virginia Slims Woman Thing Music—has traveled to 10 cities in the U.S., and AMWA members have been present every step of the way to let the tobacco industry know that they will not stand by quietly while the industry profits from targeting women and girls for early death.

AMWA has joined forces with many national women's, medical, and tobacco control organizations in order to mobilize members to gather together at sites hosting the Woman Thing Music concerts with anti-tobacco t-shirts and posters, chalk-drawing contests for children, and press conferences condemning the tobacco industry's targeting of women and girls. In addition to the Virginia Slims' "It's a Woman Thing" print ad campaign that features glamorous ultra-thin women who assert (falsely) their independence by smoking, Philip Morris is offering a free music CD featuring aspiring singer Martha Byrne with the purchase of two packs of Virginia Slims cigarettes.

AMWA members have been very active in organizing these events, serving as spokespeople, and writing op-eds and letters to the editor, which have been well covered by the media in each city. AMWA appreciates the participation of its members in these events, and would like to thank in particular Drs. Jo-Ellen Ryall, Linda Fisher, Suzanne Miller, Mary Guinan, Carol Teutsch, Rachel Schonberger, Michele Bloch, and former National Student Coordinator Melissa Merideth. For more information on how you can get involved in local tobacco control efforts, please contact Liz Pejeau in AMWA's National Office (lpejeau@amwa-doc.org).

We urge all members to advocate for the FDA rule to be implemented in its entirety so that we can prevent women and girls from smoking and reduce the number of women who die from lung cancer and tobacco-related diseases each year (140,000). For talking points when discussing tobacco control and prevention with your representatives, please contact Anne Pritchett (aprit@amwa-doc.org).

Register Now for the Interim Meeting

Time is running out to register for the Interim Meeting to be held June 27-29, 1997, at the Washington Court Hotel in Washington, DC. In addition to committee and board meetings, the meeting will include a Sunday program focusing on "Controversies in the Patient-Physician Relationship." Among the issues to be presented and discussed is physician-assisted suicide, which will be addressed by Geoffrey Fieger, Esq, attorney to Jack Kevorkian, MD, and Joanne Lynn, MD, Director of the Center to Improve Care of the Dying, The George Washington University.

Other topics and speakers include:

"Managed Care: Impact on the Quality of the Patient-Physician Relationship"—Helen Smits, MD, Medical Director, Health Right (Connecticut); Cathy Hurwit, Deputy Director, Citizen Action; Jean Fourcroy, MD, PhD, AMWA Immediate Past President

"Ethical Concerns in Adoption: The Search for Kinship"—Nancy Binder, MD, Oregon University of Health Sciences

"Abortion and the New Millennium: Whither Now?"—Frances Kissling, President, Catholics for a Free Choice; Francesca Taylor, MD, Chair, AMWA Medical Ethics Committee

"Genetics and the Future of Women's Health Care"—Linda M. Brzustowicz, MD, Rutgers University

A congressional luncheon speaker and an update of legislative issues will round out Sunday's program.

To register for the meeting or for more information, contact Gwen Miller, RN, Meeting Consultant, at 703-838-0500; email: gmiller@amwa-doc.org. If you would like AMWA to schedule a lobbying appointment for you Friday or Monday, please contact Jackie Nichols at the National Office by June 19.

Managed Care and Women

AMWA joined the Older Women's League on the Hill in presenting its Mother's Day Report on opportunities and risks for mid-life and older women in managed care on May 7. Among the speakers were Eileen McGrath, JD, AMWA Executive Director; Dr. Johnetta Marshall, President, OWL; Deborah Briceland-Betts, OWL Executive Director, and Congresswoman Eleanor Holmes Norton. The study found that while mid-life and older women can benefit from the greater availability of preventive screening and from having a single physician coordinate care, the managed care system is increasingly designed to withhold unique services and drugs needed by mid-life and older women. Copies of the report are available from OWL, phone: 202-783-6686.

AMWA Foundation Launches a Branch Partnering Project

This spring the AMWA Foundation launched a pilot project with 10 AMWA branches to encourage philanthropy and strengthen educational activities at the local level. The AMWA Foundation-Branch project seeks to forge a partnership that will benefit the association and the profession. Twenty percent of individual gifts of \$500 or more raised from the targeted branches and donated during the Foundation's Annual Fund appeals in 1997 will be returned to the local level at the beginning of next year. Branches then can use these resources on activities consistent with the educational and charitable mission of the AMWA Foundation.

For example, if 15 people in a participating branch each contribute \$500 to the Foundation during 1997, \$1,500 or 20% of the \$7,500 total will be returned to the Branch in early 1998. The more generous individuals are to the AMWA Foundation, the greater benefit to their branch.

This new exploratory collaboration builds on the Foundation's philosophy of helping to provide AMWA with resources to reach beyond the basic services funded by membership dues. It is hoped that these additional revenues will impact the branches ability to offer education, scholarship, outreach, and public awareness programs. Contributions to the Foundation are tax deductible.

The following branches have been invited to participate in this exciting pilot project: Washington, DC (01), Chicago, IL (02),Omaha, NE (06), Cincinnati, OH (11), Philadelphia, PA (25), Atlanta, GA (29), San Francisco, CA (30), Miami/Ft. Lauderdale, FL (54), Indiana (73), and Albany, NY (102).

The Foundation-Branch Project will be evaluated in early 1998 to determine its success and whether additional branches will be asked to participate next year. For more information about the project, please contact Ellen Morgenstern or Christine Fiorini at the National Office.

Tour France and Learn More About Alternative Medicine

Looking for something different to do this summer? Meet with French physicians to discuss homeopathic medicine, acupuncture, and auriculotherapy with AMWA President Debra Judelson, MD. This year's President's Trip will explore the European interest in and use of alternative medicine. The President's Trip is scheduled for August 9-19, 1997, and will include visits to Paris, Lyon, and Cannes. The trip will include a tour of the Boiron Homeopathic factory near Lyon. For more information, call Troy Davis at Rudow Travel 1-800-644-4400.

RESIDENT ROUNDS

The Future of Residency Training

Annette Kussmaul, MD Resident's Representative LSGT21A@prodigy.com

Igraduated medical school and began my internship in 1993. It was a time of down-sizing in the business world. But when I looked around the hospital, I saw the central roles that residents and fellows played in providing medical care. "Down-sizing will never happen in medicine," I thought. "There's no question about it: We run this place." I figured physicians-in-training were protected; I was naive. The following headline recently appeared in *The New York Times*: "U.S. to Pay New York Hospitals Not to Train Doctors, Easing Glut."

The Health Care Financing Administration (HCFA) is the federal agency which administers the Medicare program. Medicare pays for the care of those over 65 and pays teaching hospitals to train residents. In fact, hospitals receive up to \$100,000 per resident per year. Now, in a special agreement between HCFA and 41 New York hospitals, the number of residents will be reduced 20 to 25% over the next 6 years while Medicare payments are slowly phased out. This plan is officially called the Graduate Medical Education (GME) Demonstration Project.

Another newspaper described the project's goals as "to wean hospitals off their reliance on residents, while providing transitional funding so they can restructure the care of patients, instituting time-saving technologies and switching patient-care tasks to community doctors and paraprofessionals like physicians' assistants and nurse practitioners."

Interestingly, the hospital where I interned is participating in the program. It reports that most of the reductions will be "in specialties, preserving training programs in primary care areas such as geriatric medicine, pediatrics, internal medicine, and obstetrics-gynecology."

This should come as a wake-up call to all residents and medical students. Hospital executives across the country and their congressional representatives have called for deals similar to the GME Demonstration Project. As we move into the 21st century, we can expect significantly fewer residency positions, particularly in the subspecialties. Physicians-in-training will find themselves working with—and perhaps supervising—paraprofessionals.

Will there be increased competition for training slots? How will these changes affect residents' workloads? Of greatest importance: Will patient outcomes be affected? Unfortunately, only time will tell.

STUDENT SENATE

Speak Out

Louise Davies, National Student Coordinator ldavies@u.washington.edu

reetings to medical students throughout the country! J While you are at your home school working on your own successful grassroots projects, we would like you to turn your attention to the battle for affirmative action. AMWA and the American Medical Student Association (AMSA), the Student National Medical Association, and the National Network of Latin American Students has developed an education project to be used at medical schools across the country in order to help preserve affirmative action and educate all people on the importance of maintaining such programs. Though people may tell you affirmative action is no longer needed, the statistics indicate otherwise. Only 2% of all department heads at academic institutions are women, and though women are now 42% of medical students, they lag far behind men in leadership roles.

All branch presidents should have received a green packet with a letter of explanation on how to use educational material on affirmative action. If would like additional copies, contact AMSA at 703-620-6600.

We also would like to recognize our new regional student coordinator for Region 5, Priscilla Madsen, University of Texas, Southwest. Every region is now represented by a student coordinator. Elections occur at AMWA's annual meeting. The next election will take place in November at the annual meeting in Chicago, and students are urged to come and vote.



Congratulations to AMWA member and Resident Representative Annette Kussmaul, MD, (left) who received the AMA/Glaxo Wellcome Achievement Award in recognition of her exceptional leadership abilities and achievements in community activities.

Mentoring: Two Students With Two Different Views

A the Annual Meeting in Boston, AMWA awarded the Janet Glasgow Essay Award to Mindy Kim-Miller, a medical student at the University of Wisconsin Medical School for her inspirational essay, "A Woman, An Individual." Sayantani Dasgupta, a student at Johns Hopkins University School of Medicine, received a Special Recognition Award for her thought-provoking essay. Excerpts from both appear below.

Mindy Kim-Miller: Dr. Susan taught me about recognizing and overcoming the challenges a woman must expect to face in a traditionally male-dominated society and career. She shared her stories of attending medical school as one of the few women in her class. The pressure to excel above the male students and to earn the same level of respect as any of them was tremendous....From the opposite perspective, she cautioned me against falling under the feminist label or stereotype. She told me about the oversimplifications created by labels. She believed in the equality of the genders. But she also believed that equality did not necessarily mean that each female was equal to each male. Nor was each female equal to each female...She continues to inspire me. Lately, she has been taking time away from the office to practice medicine where people most need it. As part of the United Nation's efforts, she has gone to Sudan and a remote island near Indonesia to help the people there...Ours was the best kind of professional relationship possible. At the same time that she was helping me, we became friends. Our time together inspired enough thought and desire to convince me to pursue medicine.

Sayantani Dasgupta: While I had an abundance of female mentors in college, I have strongly felt a lack of female physician mentoring in medical school. Perhaps this is because medicine has "made a man" out of mentoring. By this, I mean that within the old-boys culture of medicine, the very nature of mentoring, like the nature of being a good doctor, remains patriarchally-defined...Thus the pattern of mentorship I have witnessed in med school is heavily steeped in hierarchy, discipline, distance, and respect. Although it is possible for women to mentor in this pattern, it is, for me, an unnatural, unfamiliar and unwanted model of relationship...Bengal, the region of India where my parents hail from, is perhaps one of the only cultures left where goddess-worshipping is still the norm, and mothers, earthly embodiments of the great goddesses, are considered to have awesome power. It is this ideal of mentorship, which involves encouragement and challenge as well as comfort and care which I find most effective in my life...Interestingly enough, I have found

such a pattern of mentorship in med school. However, these maternal mentors are not physicians. They are the nurses, physicians' assistants, secretaries, and housekeepers who create an almost underground network of support within the hospital. This invisible net has caught me time and time again. For example, during my ob/gyn clerkship, a scrub nurse I called "Miss Rosa" invariably had my size gloves out before even the attending physicians. She made room for me at the operating table. It was she who made sure I was able to attend each and every interesting case. "Paging Dr. Say," she would call down the hallway....Undoubtedly, older women physicians have had to fight hard to break into the "male locker room." However, I don't see the point of subsuming myself into someone else's model, nor do I think it is wise to distance ourselves from our non-physician sources of female support; i.e., those in the "women's locker room." Both the culture of medicine and the culture of mentoring must be true to who we are—as women, as physicians. It's time to get out of the male locker room and make a room of our own.

Committee and Task Force News

The Publications Committee has formed a new task force that seeks to explore and create new opportunities to publish materials in the form of books, newsletters, and/or electronic information on topics of interest to AMWA and consistent with AMWA's mission. In addition, the task force will solicit and review articles on aspects of women's health to be placed on the web site. By increasing our publications, we will help fulfill AMWA's mission to educate the lay and medical community about women's health. Moreover, we will increase our visibility and credibility as a reliable source of information regarding women's health needs.

Donna Shelley, MD, Chair of the Task Force and the Publications Committee (donna_shelley@smtplink.mss.edu), encourages all members with a talent for writing, a respect for deadlines, and an idea they want to share, to contact her. She envisions a number of opportunities to publish on topics related to women's health and of interest to women physicians. Please visit AMWA's web site for more information on the 1997 work plan. The Task Force will meet at 8:00 am on Saturday, June 28 at the Interim Meeting, and all early risers are invited to attend.

Current AMWA task forces and chairs include Branch Development (Susan Sklar, MD, SUSinLB@aol.com), Electronic Media (Angela Tiberio, MD, atiberio@aol.com),

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WHAT'S HAPPENING





AWWA

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Newsletter Committee and Staff

Debra R. Judelson, MD, AMWA President
Diane Helentjaris, MD, VP, Communications
Donna Shelley, MD, Chair, Publications
Lynn Epstein, MD, Director of Students
Louise Davies, Arielle Stanford, National Student Coordinators
Annette Kussmaul, MD, Resident Representative
Eileen McGrath, JD, Executive Director
Anne Pritchett, Managing Editor, Director of Public Affairs and
Government Relations

Liz Pejeau, Desktop Publisher and Layout Artist, Project Director What's Happening in AMWA is published six times per year (February, April, June, August, October, December) by the American Medical Women's Association (AMWA). All editorial material becomes the property of AMWA. AMWA reserves the right to edit all materials. For a copy of an article or an issue of the newsletter, contact AMWA, 801 N. Fairfax St., Ste. 400, Alexandria, VA 22314; Online: aprit@amwa-doc.org. Phone: 703/838-0500; Fax: 703/549-3864.

Emergency Contraception Hotline—Do your patients know that there is a toll-free telephone information service on emergency contraception? The number is 1-888-NOT-2-LATE (1-888-668-2528). The service operates 24 hours a day in English and Spanish and provides callers with information about all available emergency contraceptive methods as well as referrals to five health care providers in their calling area. If you prescribe emergency contraception and would like to be included in the Hotline's referral network, please contact Emergency Contraception Hotline, 21 08544-2091 Ave.. Princeton, NJ, Prospect (http://opr.princeton.edu/ec/). AMWA is one of several organizations supporting a resource packet on Emergency Contraception that will be available in late May.

a garage	alendar
June 33-23, 1997	Fifth Annual Congress on Women's Health, Renaissance Washington DC Hatel
June 26, 1997	Branch 1 Dinner, "Decision- Making for the End-of-Life"
June 27-29, 1997	AMWA Interim Meeting, Washington (DC) Court Hotel
Burgas 1997 Casaran	Breach 83, "The Politics of Breast Cancer," La Cumbre Country Club
Par deputs, contact the lo	cal branch or AMWA's National

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Ethnic Women's Health (Patricia Davidson, MD, medent@pop.erols.com), Regional Development (Lesly Mega, MD, ps@eastnet.educ.ecu.edu), Violence Against Women (Marjorie Braude, MD, marjdoc@aol.com), Website (Debra R. Judelson, MD, judelsondr@amwadoc.org), Women's Health Curriculum (Lila Wallis, MD, lilawallis@aol.com), and Women in Specialties (Nancy Binder, MD, PhD, bindern@ohsu.edu). If you are interested in joining and/or learning more about any of these task forces, please contact the chairs listed above.