Start a Continuing Education Series at Your Facility

In an environment of fiscal constraint, Indian health programs will need to be careful about how their resources are spent on continuing professional education. Indeed, we have already seen changes. To reduce spending on travel and living expenses as well as time away from work usually incurred when attending live conferences in a central location, we have seen more “virtual” meetings using teleconferencing technology. Live webinars and recorded, play-on-demand webinars allow individuals to learn and earn continuing education credit from their home or work.

Additionally, when budgets are tight, patient care always takes precedence over travel and training. The “allowance” for physicians and other providers to go to a meeting of their own choosing has been reduced or eliminated at some facilities. The writing is on the wall; leaving home and work to travel to a live meeting may someday be a thing of the past.

One solution to this problem that many service units rely upon is the periodic (weekly, monthly) one-hour “grand rounds” type presentation right at their own facility. These are referred to in continuing education jargon as a “regularly scheduled series,” and they encompass didactic lectures, morbidity and mortality sessions, tumor boards, journal clubs, and so on. Some 40 different series are ongoing; some facilities even have two or more different series in place for different specialties or interest groups.

There are many advantages to this strategy, including the following:

• There is little or no time away from patient care. Some service units use an hour of administrative time during the work week; others organize these sessions during lunch time (“brown bag series”) or after hours in conjunction with a potluck dinner.
• There is little or no expense. Using service unit presenters or specialists who are visiting for patient care clinics eliminates the cost of travel and per diem.
• Multiple professions can learn together. This builds teamwork and allows all professions to offer their input and understand the perspective of others; it builds “esprit de corps” and may contribute to retention.
• It is designed to address specific problems in clinical practice at the facility with the intent to change clinical practices and improve patient care and patient outcomes.
• It can factor in cultural matters, consideration of resource limitations, unique logistic problems such as weather and distance, formulary issues, and many other points that cannot be addressed in “off-the-shelf” continuing education.
• It can take advantage of presenters who are familiar with patient care in Indian Country, as well as non-medical personnel who can contribute a great deal to discussions about issues that directly affect patient care (e.g., law

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enforcement, education, social services, and many others).

- It can incorporate technology that allows the sessions to be shared with satellite facilities, thus reaching a larger audience.
- It can incorporate technology to bring presenters from great distances; some service units have ongoing relationships with prestigious medical teaching centers to bring their experts to the facility using a speakerphone and a PowerPoint™ presentation delivered by e-mail. Other facilities share their activities with outlying satellite clinics using similar technology.
- These sessions can produce immediate, tangible results, such as formulary changes, revision of policies and procedures, adoption of new algorithms or standards of care, agreement on unified approaches to disease management, and so on.

In general, these series are run by an individual “champion” who may be a nurse, a physician, or some other clinician, who is supported by a planning committee comprised of at least one individual from each profession for which the series is intended. A proposal is submitted to the IHS Clinical Support Center (CSC) for sponsorship of the series for a 12-month period. Details about the step-by-step process can be found at http://www.ihs.gov/CSC/index.cfm?module=oce. Although it takes some time and energy to get the series started, once it is established, it is easy to sustain. For facilities that are IHS or those that are tribal but have not taken their “share” of the CSC budget, there is no cost for CSC’s services. For those tribal facilities that have taken their “share,” they can reimburse CSC a nominal amount to cover a portion of the cost of CSC’s services.

We encourage you to take advantage of this opportunity to obtain continuing education that is tailored to the needs of your facility, that can have an immediate impact on patient care, and that is extremely cost-effective and cost-efficient. If you have questions or need help getting started, e-mail john.saari@ihs.gov. We might also be able to put you in contact with someone who is experienced managing these activities so that he or she can mentor you through the process of getting started.

The CME Accreditation Statement: What it Means for You

The item on the following page has been reprinted, with permission, from the October 31, 2013 ACCME (Accreditation Council for Continuing Medical Education) Report eNewsletter. This is one of four handouts written to be distributed to your planning committee, participants, administrators, and other stakeholders to convey to them the value of accredited continuing medical education. For more information about the ACCME and the resources and information they offer, go to accme.org.
The CME Accreditation Statement: What It Means for You

When you review announcements of continuing medical education (CME) activities, you may notice an accreditation statement, which tells you that the education provider is accredited by the Accreditation Council for Continuing Medical Education (ACCME®) or by a state medical society to provide CME. What is the value and benefit of that statement for you?

High Standards
The statement tells you that the CME provider is part of a community of more than 2,000 accredited organizations across the country that offer more than 130,000 educational activities each year, addressing national, regional, and community-based health care improvement priorities. ACCME accreditation assures physicians and other health care professionals that CME is designed to be relevant, effective, and independent. The ACCME accredits organizations that offer CME primarily to national or international audiences and also recognizes state and territory medical societies as accreditors for organizations that offer CME primarily to learners from their state or contiguous states. All CME programs within the ACCME system are held to the same high standards. The accreditation statement means that the CME provider has met those standards.

Effective Education
The ACCME accreditation requirements are a roadmap for producing effective education that supports health care professionals’ commitment to lifelong learning and practice improvement. The ACCME Accreditation Criteria call on accredited providers to develop CME activities that address the real-world problems that physicians and other health care professionals encounter in their practice, whether they work in clinical care, research, administration, executive leadership, or other areas of medicine.

Safeguarding Independence
The ACCME Standards for Commercial Support require CME providers to design activities that are independent, free from commercial bias, and based on valid content. The ACCME’s objective is to support the free flow of scientific exchange while safeguarding accredited CME from commercial influence.

A National Model
The accreditation statement is brief, but it stands for a voluntary, self-regulatory system that has become a national model. Since its founding in 1981, the ACCME has focused on setting and maintaining accreditation requirements that are relevant to physicians’ lifelong learning needs and responsive to changes in the health care environment. The ACCME accreditation system is your accreditation system, ensuring that accredited CME is of, by, and for the profession of medicine.

Electronic Subscription Available

You can subscribe to *The Provider* electronically. Any reader can now request that he or she be notified by e-mail when the latest issue of *The Provider* is available on the Internet. To start your electronic subscription, simply go to *The Provider* website (http://www.ihs.gov/Provider). Click on the “subscribe” link; note that the e-mail address from which you are sending this is the e-mail address to which the electronic notifications will be sent. Do not type anything in the subject or message boxes; simply click on “send.” You will receive an e-mail from LISTSERV.IHS.GOV; open this message and follow the instruction to click on the link indicated. You will receive a second e-mail from LISTSERV.IHS.GOV confirming you are subscribed to *The Provider* listserv.

CME Credit for Teaching

The IHS Clinical Support Center (CSC) is permitted to award MD physicians continuing medical education (CME) credit to recognize the learning associated with the preparation and teaching of an original presentation at the accredited CME provider’s live activities that are certified for *AMA PRA Category 1 Credit™*. This teaching credit is awarded on a 2:1 basis; that is, the physician will earn two hours of credit for one hour of teaching. Credit can be awarded only once for a given presentation, and cannot be awarded for repeat presentations of the same material. Physicians cannot earn credit for attending their own presentation, but they can earn credit for other presentations they attend during the rest of the activity.

The way to take advantage of this is to use the “Physician Teaching Credit Request Form.” This may be obtained from us by phone or e-mail request, or from our website (use a “clean” copy from one of these sources, not the sample copy on the following page). Make additional copies and keep them handy; when you submit a report about a presentation given at your facility, complete and submit this form with that report.

This is an excellent way to reward your physician presenters (or yourself) for the effort involved in preparing and giving a CME presentation. If you have any questions, e-mail john.saari@ihs.gov.
Facility                                                            OCE File#                                                            Title of Activity

INDIAN HEALTH SERVICE
Clinical Support Center
Office of Continuing Education
40 North Central Avenue, Suite 780, Phoenix, AZ 85004

PHYSICIAN TEACHING CREDIT REQUEST FORM

Title of Presentation: _____________________________________________

Date of Presentation: ___________________ Time: __________ to __________

Presenter’s Information:

Name & Degree: _____________________________________________

Job Title: _____________________________________________

Work Site: _____________________________________________

Address: _____________________________________________

Phone: _____________________________________________

Email: _____________________________________________

ACCREDITATION:

The Indian Health Service (IHS) Clinical Support Center is accredited by the Accreditation Council for Continuing Education to sponsor continuing medical education for physicians.

The IHS Clinical Support Center awards the above presenter with ______ hours of *AMA PRA Category 1 Credit™* for teaching as described above.

NOTE: A presenter may receive up to 2 hours of *AMA PRA Category 1 Credit™* for each hour of teaching in a Category 1 activity. Physician faculty may not claim credit as a participant for their own presentations; however, they may claim credit for other segments they attend as a participant at a certified live activity. A physician may claim *AMA PRA Category 2 Credit™* for any teaching for which they did not receive *AMA PRA Category 1 Credit™* for teaching.

*Teaching credits are not officially recorded on your cumulative transcript; please keep all copies of teaching credit certificates in your personal file.

Last Updated: Feb 2011
MEETINGS OF INTEREST

Advancements in Diabetes Seminars
Monthly; WebEx

Join us monthly for a series of one-hour WebEx seminars for health care program professionals who work with patients who have diabetes or are at risk for diabetes. Presented by experts in the field, these seminars will discuss what’s new, update your knowledge and skills, and describe practical tools you can use to improve the care for people with diabetes. No registration is necessary. The accredited sponsors are the IHS Clinical Support Center and IHS Nutrition and Dietetics Training Program.

For information on upcoming seminars and/or previous seminars, including the recordings and handouts, click on this link and see Diabetes Seminar Resources: http://www.diabetes.ihs.gov/index.cfm?module=trainingSeminars

Available EHR Courses

EHR is the Indian Health Service’s Electronic Health Record software that is based on the Resource and Patient Management System (RPMS) clinical information system. For more information about any of these courses described below, please visit the EHR website at http://www.ihs.gov/CIO/EHR/index.cfm?module=rpms_ehr_training. To see registration information for any of these courses, go to http://www.ihs.gov/Cio/RPMS/index.cfm?module=Training&option=index.

The Fourth Annual Alaska Native Health Research Conference
Anchorage, Alaska; March 27-28, 2014

The 4th Annual Alaska Native Health Research Conference (ANHRC), hosted by the Alaska Native Tribal Health Consortium Health Research Review Committee will be held at the Hotel Captain Cook, Anchorage, Alaska, on March 27-28, 2014. The objectives of the conference are to assemble 200 - 300 tribal leaders, health professionals, health organization directors, health educators, Alaskan students interested in health-related fields, and health researchers serving Alaska Native people statewide to build capacity for health research by Alaska tribal organizations and in Alaska Native communities and to promote tribal self-determination (Public Law 93-638, 1996) through development of Alaska Native health research professionals. Specific aims include 1) promoting community-based participatory research, cultural competence of research staff, and community confidence in research; 2) sharing advances in Alaska Native health research with tribal leaders, community members, and health research professionals internal and external to the Alaska Tribal Health System; and 3) demonstrating the positive impact of health research on the health status of Alaska Native people, thereby reinforcing the need for continued support of health research to minimize important health disparities. The 4th ANHRC provides a forum whereby researchers, at the request of Native leadership, will share basic information pertaining to epidemiologic surveillance and observational research, community intervention studies, and clinical randomized controlled trials. A substantial portion of this conference will focus on the multiple environmental health projects conducted in several rural communities statewide.

Please visit our website periodically for registration information and other updates on the conference as they are posted at https://www.signup4.net/public/ap.aspx?EID=20133021E&OID=50. The website can also be easily accessed through a link on https://www.alaskatribalhealth.org/.
POSITIVE VACANCIES

Editor's note: As a service to our readers, The IHS Provider will publish notices of clinical positions available. Indian health program employers should send brief announcements as attachments by e-mail to john.saari@ihs.gov. Please include an e-mail address in the item so that there is a contact for the announcement. If there is more than one position, please combine them into one announcement per location. Submissions will be run for four months and then will be dropped, without notification, but may be renewed as many times as necessary. Tribal organizations that have taken their tribal “shares” of the CSC budget will need to reimburse CSC for the expense of this service ($100 for four months). The Indian Health Service assumes no responsibility for the accuracy of the information in such announcements.

Primary Care (Internal Medicine or Family Practice) Physicians
Phoenix Indian Medical Center; Phoenix, Arizona
The Departments of Family and Internal Medicine at the Phoenix Indian Medical Center have openings for board certified/eligible outpatient family and internal medicine physicians. Our adult primary care services are provided by eleven family physicians, six internists, and two midlevel providers. Our physicians work in multidisciplinary health care teams with the active participation of nurse care coordinators, nutritionists, pharmacists, nurses, clerks, and other staff, all of whom work together to provide a medical home for patients with chronic illnesses. We have an advanced access appointment system and have been using the Electronic Health Record for over six years. Full time 8 and 10 hour per day schedule options are available. Competitive federal salaries and benefits are available, and Commissioned Officer applicants are also welcome. Job applications should be made online at USAJOBS.gov. For more information, please contact Dr. Eric Ossowski, Family Medicine, or Dr. Dorothy Sanderson, Internal Medicine at (602) 263-1537. (10/13)

Hospitalist (Family Practice or Internal Medicine) Physicians
Phoenix Indian Medical Center; Phoenix, Arizona
The Phoenix Indian Medical Center (PIMC) is actively seeking board certified/eligible family medicine or internal medicine physicians to staff its inpatient unit. PIMC is an inpatient and outpatient facility located in downtown Phoenix that provides medical care to patients from over 40 tribes. Hospitalists typically round/admit/consult on 8 to 12 patients per shift. Typical admitting diagnoses include diabetic ketoacidosis, hepatic encephalopathy, pneumonia, asthma, pyelonephritis, and cellulitis. Specialty services available to provide consultation on the inpatient service include surgery/wound care, ENT, obstetrics and gynecology, rheumatology, infectious diseases, nephrology, orthopaedics, podiatry, and dermatology. Competitive federal salary and benefits are available, and Commissioned Officers are also welcome to apply. Interested physicians should contact Dr. Dorothy Sanderson at dorothy.sanderson@ihs.gov, or telephone (602) 263-1537, ext. 1155. (10/13)

Family Practice Physician Pharmacist Laboratory Supervisor EMT Basic/Intermediate
Alamo Navajo School Board, Inc.; Alamo, New Mexico
The Alamo Navajo School Board, Inc., Health Division is seeking health practitioners to come work with their dedicated staff on the Alamo Navajo Reservation. Our clinic is located 140 miles southwest of Albuquerque and sixty miles west of Socorro. We have a multiservice community health center that include medical, dental, onsite pharmacy and lab, optometry, mental health, emergency medical, aftercare, and community health education services. One focus is on diabetes awareness and prevention of the disease that affects one in every five people in Alamo. In support of the effort, the Health Division, in collaboration with the Board and Administration, constructed a Community Wellness Center. The facility has a full-size gymnasium, aerobic and weight rooms, classrooms, kitchen, game room, day care, and an outdoor fitness path.
Alamo Navajo School Board, Inc., provides an excellent benefits package that consists of a competitive annual salary; group health insurance/life insurance at no cost to employees, and shared cost for dependents; a 403(b) retirement plan and a 457(b) deferred compensation plan; relocation reimbursement; 12 major holidays off; personal leave; and Community Wellness Access. Hiring preference will be given to Navajo and Indian Preference. For more information, please contact Hotona Secatero, Director of Personnel, at (575) 854-2543, extension 1309, or e-mail hsecatero@ansbi.org. (10/13)

Psychiatrist Consolidated Tribal Health Project, Inc.; Calpella, California
Consolidated Tribal Health Project, Inc. is a 501(c)(3) non-profit, ambulatory health clinic that has served rural Mendocino County since 1984. CTHP is governed by a board comprised of delegates from a consortium of nine area tribes, eight of which are federally recognized, and one that is not. Eight of the tribes are Pomo and one is Cahto. The campus is situated on a five-acre parcel owned by the corporation; it is
not on tribal land.

CTHP has a Title V Compact, which gives the clinic self-governance over our Indian Health Service funding allocation. An application for this position is located at www.cthp.org. Send resume and application to Karla Tuttle, HR Generalist, PO Box 387, Calpella, California 95418; fax (707) 485-7837; telephone (707) 485-5115 (ext. 5613). (9/13)

Family Physician with Obstetrical Skills
Ethel Lund Medical Center; Juneau, Alaska

The SEARHC Ethel Lund Medical Center in Juneau, Alaska is searching for a full-time family physician with obstetrical skills to join a great medical staff of 14 providers at a unique clinic and hospital setting. Have the best of both worlds by joining our practice where we share hospitalist duties and spend our remaining time in an outpatient clinic with great staff and excellent quality of life. We have the opportunity to practice full spectrum family medicine with easy access to consultants when we need them. Maintain all your skills learned in residency and expand them further with support from our tertiary care center, the Alaska Native Medical Center.

Clinic is focused on the Patient Centered Medical Home, quality improvement with staff development from the Institute for Health Care Improvement, and using the Indian Health Service electronic medical record. Frequent CME and opportunities for growth, including teaching students and residents, and faculty status at University of Washington available to qualified staff. This is a loan repayment site for Indian Health Service and National Health Service Corps, and State of Alaska SHARP program.

Work in southeast Alaska with access to amazing winter and summer recreational activities. Live in the state capital with access to theater, concerts, annual musical festivals, and quick travel to other communities by ferry or plane. Consider joining our well-rounded medical staff at a beautiful clinic with excellent benefits. For more information contact, Dr. Cate Buley, Assistant Medical Director, Ethel Lund Medical Center, Juneau, Alaska by telephone at (907) 364-4485; e-mail cbuley@searhc.org. Position open 10/1/2013. Look us up online at www.searhc.org job vacancies. (8/13)

Family Medicine Physician
Internal Medicine Physician
Sells Service Unit; Sells, Arizona

The Sells Service Unit (SSU) in southern Arizona is recruiting for board certified/board eligible emergency room physician, family/internal medicine physician, and physician assistants to join our experienced medical staff. The Sells Service Unit is the primary source of health care for approximately 24,000 people of the Tohono O’odham Nation. The service unit consists of a Joint Commission accredited 34-bed hospital in Sells, Arizona and three health centers: San Xavier Health Center, located in Tucson, Arizona, the Santa Rosa Health Center, located in Santa Rosa, Arizona, and the San Simon Health Center located in San Simon, Arizona with a combined caseload of approximately 100,000 outpatient visits annually. Clinical services include family medicine, pediatrics, internal medicine, prenatal and women’s health care, dental, optometry, ophthalmology, podiatry, physical therapy, nutrition and dietetics, social work services, and diabetes self-management education.

Sixty miles east of the Sells Hospital by paved highway lies Tucson, Arizona’s second largest metropolitan area, and home to nearly 750,000. Tucson, or “The Old Pueblo,” is one of the oldest continuously inhabited sites in North America, steeped in a rich heritage of Indian and Spanish influence. It affords all of southern Arizona’s limitless entertainment, recreation, shopping, and cultural opportunities. The area is a favored tourist and retirement center, boasting sunbelt attributes and low humidity, with effortless access to Old Mexico, pine forests, snow sports, and endless sightseeing opportunities . . . all within a setting of natural splendor.

We offer competitive salary, relocation/recruitment/retention allowance, federal employment benefits package, CME leave and allowance, and loan repayment. For more information, please contact Peter Ziegler, MD, SSU Clinical Director at (520) 295-2481 or by e-mail at peter.ziegler@ihs.gov. (8/13)

Mid-Level Practitioner
Health Director
Quileute Tribe; La Push, Washington

The Quileute Tribe has a job opening for a full-time mid-level practitioner. Must be a certified physician assistant, licensed in the state of Washington, and must have a valid Washington driver’s license. Submit your application, professional license, cover letter, resume and three references by August 16, 2013, although the position will be open until filled.

We are also looking for a health director, who will provide administrative direction, negotiate and administer IHS contracts, develop and administer budgets, write reports, insure HIPPA compliance, comply with ACA, manage EHR, evaluate staff, and insure third party reimbursements are done. Must have a bachelor’s degree related to health administration, and two years of management experience. This position is open until filled.

Telephone (360) 374-4366 or visit our website at www.quileutenation.org for a job application and job description. Alternatively, you may contact Roseann Fonzi, Personnel Director, PO Box 279, 71 Main Street, La Push, Washington 98350; telephone (360) 374-4367; fax (360) 374-4368; or e-mail roseann.fonzi@quileutenation.org. (8/13)
Family Practice Physician
Jicarilla Service Unit; Dulce, New Mexico

The Jicarilla Service Unit (JSU) is a new, beautiful 65,000 square foot facility nestled in the mesas of northern New Mexico with views of the edge of the Colorado Rockies. We provide care to the Jicarilla (“Basket-maker”) Apache community with a population of 4,400. Our clinic has an opening for a board certified/eligible family practice physician for purely outpatient care with a 40 hour work-week. Our site qualifies for IHS and state loan repayment programs. JSU has a fully functional electronic health record system. Our pharmacy has a robust formulary including TNF-alpha inhibitors and exenatide. The clinic also has an urgent care clinic for acute walk-in cases. Our staff currently consists of an internist, three family practice physicians, an optometrist, and three dentists. We also have a team of dedicated public health nurses who specialize in home visits for elders and prenatal follow-up. The Jicarilla Apache Nation is self-sufficient with revenues from oil and natural gas. Much has been invested in the infrastructure of the reservation, including a large fitness facility, a modern supermarket, a hotel and casino, and more. We are also located 45 minutes from the resort town of Pagosa Springs, which has year-round natural hot springs and winter skiing at renowned Wolf Creek Pass.

We welcome you to visit our facility in person. To take a video tour of the Nzh’o Na’ch’iide’e Health Center online, go to http://www.usphs.gov/Multimedia/VideoTours/Dulce/default.aspx. Please call Dr. Cecilia Chao at (575) 759-3291 or (575) 759-7230; or e-mail cecilia.chao@ihs.gov if you have any questions. (4/13)

Hospitalist
Gallup Indian Medical Center; Gallup, New Mexico

Gallup Indian Medical Center (GIMC) is currently seeking energetic and collegial internists for our new hospitalist program. The hospitalists care for all adult inpatients previously taken care of by family medicine and internal medicine physicians, and provide consultation services. We have seven FTEs for hospitalists, and while we are still growing, we enjoy further inpatient staffing support from internal medicine and family medicine.

GIMC is a 99-bed hospital in Gallup, New Mexico, on the border of the Navajo Reservation. Clinical specialties at GIMC include internal medicine, family medicine, critical care, cardiology, neurology, orthopedics, ENT, radiology, OB/GYN, general surgery, ophthalmology, pathology, pediatrics, emergency medicine, and anesthesiology. The hospitalists’ daily census is approximately 25 - 30. There is a six bed ICU. Our patient population includes Navajos, Zunis, and others living nearby, as well referrals from smaller clinics and hospitals.

Gallup has a diverse community and is very livable, offering a thriving art scene, excellent outdoor activities (hiking, hiking, rock climbing, cross-country skiing), safe neighborhoods, diverse restaurants, national chains and local shops, and multiple public and parochial school options. The medical community is highly collegial, is committed to continuing education, has an on-going collaboration with Brigham and Women’s Hospital, and has a high retention rate.

For more information, contact Eileen Barrett, MD, at (505) 722-1577 or e-mail eileen.barrett@ihs.gov. Or please consider faxing your CV to (505) 726-8557. (2/13)

Clinical Director, Family Medicine Physician
Kodiak Area Native Association; Kodiak, Alaska

The Kodiak Area Native Association (KANA) is searching for an adventurous, highly motivated physician to lead our team that is committed to patient-centered care, customer service, quality improvement, and stewardship. KANA is celebrating its 47th year of providing patient and family focused health care and social services to Alaska Natives and other beneficiaries of KANA throughout Kodiak Island. KANA’s award winning medical staff is comprised of four physicians who work in conjunction with two mid-level providers, dedicated nurse case managers, and ancillary staff to deliver the highest quality, team based health care to an active user population of 2800 patients. Integrated behavioral health and pharmacy services within the primary care setting also facilitate an advanced support system to ensure our patients’ needs are met.

The spectacular scenic beauty of Kodiak Island offers a backdrop for an abundance of outdoor and family activities, including world-class fishing, hunting, wildlife viewing, kayaking, and hiking just minutes from your door. Its sometimes harsh climate is balanced by mild temperatures and unparalleled wilderness splendor that provide Kodiak’s residents with a unique lifestyle in a relaxed island paradise.

KANA offers competitive compensation and an excellent employee benefits package, including medical, dental, vision, flexible spending accounts, short term disability insurance, life insurance, accidental death and dismemberment insurance, 401k with employer contribution, fitness membership, and paid time off.

If you’re interested in hearing more about how you can start your journey to an adventure of a lifetime, please visit our website at www.kanaweb.org, give Lindsay Howell, Human Resources Manager, a call at (907) 486-9880, or contact our HR Department at hr@kanaweb.org. Alaska’s Emerald Isle awaits you! (2/13)

Pediatrician
Blackfeet Community Hospital; Browning, Montana

This hospital-based government practice is seeking a BC/BE pediatrician to work with another pediatrician and a pediatric nurse practitioner. Practice true primary care pediatrics with inpatient, outpatient, and newborn hospital care. Attractive call and rounding schedule. Competitive salary with federal government benefits. The area provides a wide
variety of outdoor recreational activities, being only 12 miles from Glacier National Park. For more information, please contact Dr. Tom Herr at thomas.herr@ihs.gov or call (406) 338-6372. (1/13)

**Director, Health and Human Services**
**Ysleta Del Sur Pueblo; El Paso, Texas**

The Ysleta Del Sur Pueblo (YDSP) Health and Human Services Department is a team of health care professionals and staff fully committed to their patients’ physical, emotional, and spiritual wellbeing, offering a comprehensive range of health and human services that ensure a safe environment, quality service, and accessible health care in an atmosphere of respect, dignity, professionalism, and cultural sensitivity.

YDSP’s HHS department is seeking a Director. This person has responsibility and accountability for the development and implementation of a plan to bring HHS to an ongoing operating success. The Director will need the flexibility to make quick and efficient business decisions, while at the same time assuring that operations respect the broad guidelines and, more importantly, the service standards expected by tribal members and tribal leadership. To get more information or to apply, contact Jason S. Booth, CEO, Ishpi, Inc., telephone (651) 308-1023; or e-mail jason@ishpi.biz. (1/13)

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**Our Apologies**

We apologize for the delay in the production of this issue. Constraints on funding at the end of the fiscal year made it impossible to complete the preparation of the issue until now. We will catch up with our usual monthly publishing schedule as soon as possible. We are currently accepting submissions for the December issue.

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**THE IHS PRIMARY CARE PROVIDER**

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**Publication of articles:** Manuscripts, comments, and letters to the editor are welcome. Items submitted for publication should be no longer than 3000 words in length, typed, double-spaced, and conform to manuscript standards. PC-compatible word processor files are preferred. Manuscripts may be received via e-mail.

Authors should submit at least one hard copy with each electronic copy. References should be included. All manuscripts are subject to editorial and peer review. Responsibility for obtaining permission from appropriate tribal authorities and Area Publications Committees to publish manuscripts rests with the author. For those who would like more information, a packet entitled “Information for Authors” is available by contacting the CSC at the address above or on our website at www.csc.ihs.gov.