



*Late Career Physician  
Evaluations: My Thoughts  
and Experience*

Coalition For Physician Enhancement (CPE)

Russ Kridel, MD

AMA Board of Trustees, Chair-Elect

And Late Career Physician

Thursday, October 3, 2019 1:00 pm

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# Who am I?

- Late career physician and surgeon still operating, writing papers, and teaching.
- Before someone else (credentials committee, department chair, patients, plaintiff's attorney, the feds) questions my ability to carry on as I have done for the last 35+ years, I wanted to be able to prove I am still at the top of my game. (and, my ego says, I would like to believe that my years of experience make me a better physician and are beneficial to my patients.)
- Hence, I underwent a Voluntary Assessment
  - With some trepidation, indeed, as my life plans didn't include retirement anytime soon, and I also told others I was going to get evaluated.
  - Curiosity into process, as I knew the AMA and others intimately involved in the issue.

# Long Term AMA Involvement and Concern

- Senior Physician Section (SPS) and Council on Science and Public Health (CSAPH)
  - Joint Educational Program
  - Further SPS Educational Sessions
- Council On Medical Education (CME) Report
  - Did it go far enough in recommendations? Other medical groups have....
  - Is there more to come? Council on Ethical & Judicial Affairs (CEJA)?
- If physicians don't take charge of this problem, some legislator or other body will mandate assessments on us with, no doubt, some collateral damage or inappropriate requirements: medical societies, certifying boards, State medical boards, hospitals, integrated health systems, etc.

# Problem: 10% of population over 65 years has some Cognitive Decline

- Therefore 10% of physicians still practicing at 65 and older have some cognitive decline! Physicians are people!
- How do we protect the public?
- How and when do we assess our physicians?
- Who will do the assessment?
- Who will require the assessment?
  - Surgeons say it should be mandatory: Dellinger, Pellegrini, and Gallagher: JAMA Surgery October 2017 Volume 152, Number 10
- What validated standardized screening assessment will be used?
- Will physicians volunteer for the assessment?
- Who will pay for the assessment?

## Problem: 10% of population over 65years has some Cognitive Decline

- FAA says no commercial pilot may fly after 65; used to be 60! Arbitrary Age Chosen
  - But what about Sulley?
  - Annual physical exams
- American Academy of Neurology (AAN) just recommended annual cognitive testing of all patients under neurologic care

# Practicing Docs are getting older

The American Medical Association (AMA) Council on Medical Education reports that in 1975 there were 50,993 practicing physicians 65 years or older, but by 2013, this had risen to 241,641 physicians, a 374% increase. Twenty-three percent of practicing physicians were 65 years or older in 2015.

If physicians are mandated to retire at 65 regardless of competency, what happens to the already estimated physician shortage of 40,000 –120,000?

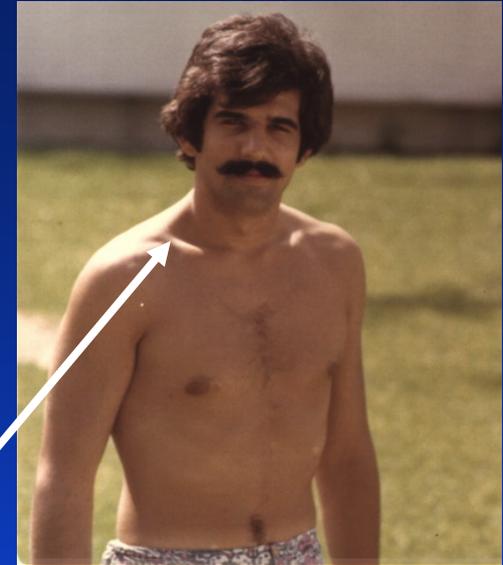
American Medical Association. *Competency and the Aging Physician. Report 5 of the Council on Medical Education (A-15)*. Chicago, IL: AMA; 2015

# Physician Resistance to Testing

- Denial: it's the other guy who needs it...
- It costs too much and I have to lose a day of my practice.
- What if it says I have a problem but I have nothing else to do with the rest of my life?
- But, I need to continue to practice because of my financial needs.
- I know I have a "minor" problem but don't want others to know.

# DENIAL!

What do you mean, I'm not the same as I was 40 years ago???



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# My Assessment—K-Star, Texas A & M

- Pre-visit:
  - privileged evaluations by colleagues, co-workers and personal physician
  - Submission of 5 patient charts
  - Personal health history questionnaire

# My Assessment—continued-2

- Greeting, outline of days' events, general interview
- In-depth review of charts with physician practicing in same specialty, who already read through the charts.
- Cognitive computer testing: Micro-Cog, reasoning, memory, learning as the rules changed.
- One-on-one cognitive testing
- Complete History and Physical exam, including
  - Thorough neurological testing
  - Hearing and vision check
  - More cognitive questions
- Kudos to Dr. Robert Steele and involved colleagues
  - A very positive experience

# My Assessment—continued-3

- Incredibly thorough and quickly returned written evaluation: I passed! Whew!!
- Relief and Empowerment
- But, What would I have done, if I hadn't?
- Cost of process –inexpensive when you add up what went into the evaluation; may have cost K-Star more than I paid.

# Who should offer and/or pay for the assessment?

- Personal? Practice? Group? Integrated Health System? Hospital? Academic Department? Medical Association? Specialty Society? Specialty Board?
- I am thinking: Why not the Liability Carrier? Older doctors get sued more!

Tessler MJ, Shrier I, Steele RJ. Association, between anesthesiologist age and litigation. *Anesthesiology*. 2012;116(3):574-579

- Win—Win Situation
- Kicker: You have to send results to Carrier!



***THANK YOU!***  
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