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2025 CAP and MPT Elections: Your Vote Is Critical

For 50 years, members of the Cooperative of American Physicians, Inc. (CAP) have trusted the organization's physician leaders to protect the future of the enterprise and ensure exceptional medical professional liability coverage provided through the Mutual Protection Trust (MPT).

This year, elections for the CAP Board of Directors and for the MPT Board of Trustees will be held on July 16, 2025, in conjunction with the Annual Meeting of Members. The CAP ballot, MPT proxy, and additional voting information will be emailed to all CAP members of record later in May. **It is critically important that all members vote without delay**.

Your Vote is Critical

It is the responsibility of all members to vote for the candidates who have dedicated themselves to CAP and MPT, and to serving their fellow members. More than 50% of the membership needs to vote to elect its physician leaders.

Please Vote by Docusign

In past elections, CAP has relied on mailed ballots to collect votes. This year, to help save on significant administrative expenses on behalf of all members, CAP requests that you vote by Docusign immediately when you receive your emailed ballot and proxy later in May. Voting will take no more than a couple of minutes and will ensure that you do not receive ongoing notifications reminding you to vote.

Meet the Nominees

We invite you to learn more about the seven physician members who have been nominated by the CAP and MPT boards to serve the membership. Upon election, this pool of candidates will have the privilege of maintaining a legacy of trust, security, and strength on behalf of 13,000 CAP members.



Name: Christopher J. Combs, MD Medical School: Washington University in St. Louis Practice Location: Long Beach, CA Specialty: Orthopaedic Surgery Years in Practice: 19 years CAP Member Since: 2009

For 50 years, the physician leaders of CAP and MPT have stood by their mission to deliver trusted medical malpractice coverage and much more for their fellow members.

Having participated on multiple committees, I've seen firsthand the commitment to education and resources that CAP and MPT offer to ensure its carefully selected physicians are well-equipped to lead our organization. As a new member of the CAP and MPT boards, I would not only uphold the long-term strength of the enterprise, but also ensure that we continue to develop practice solutions that help you cut costs, save time, and remain independent.



Name: Gracie-Ann E. Dinkins, MD Medical School: UCI School of Medicine Practice Location: Lynwood, CA Specialty: General Surgery Years in Practice: 24 years CAP Member Since: 2000

After five decades, CAP members continue to rely on the organization's physician leaders to ensure the financial stability of the enterprise and, ultimately, solid medical malpractice coverage for its membership. I have been a CAP member for over 20 years

and take pride in being part of the organization's growth and transformation. Through my involvement in various committees, I have been inspired by how we, your CAP and MPT leaders, foster a culture of transparency, fairness, and innovation. If chosen to serve as a member of the CAP and MPT boards, I promise to represent your needs to support your continued growth and our collective sustainability.



Name: Steve E. Kasper, MD Medical School: Keck School of Medicine of USC Practice Location: Glendale, CA Specialty: Family Medicine Years in Practice: 34 years CAP Member Since: 1994

As a CAP and MPT physician leader, I've witnessed and celebrated our contributions as CAP members. We've achieved growth, maintained outstanding financial stability, and expanded programs that have helped countless members in their practices. Only

an organization founded for physicians by physicians could effectively develop programs designed to respond to our unique needs. In continuing my service on the CAP and MPT boards, I will uphold this legacy and ensure that you always have solid medical malpractice coverage you can count on, and practice management and risk management benefits and resources that maximize your ability to provide excellent patient care.



Name: Wayne M. Kleinman, MD Medical School: Virginia Commonwealth University School of Medicine Practice Location: Tarzana, CA Specialty: Anesthesiology Years in Practice: 36 years CAP Member Since: 1992

My 33 years of membership and service as a past president and chair of CAP have allowed me to lead and engage in the organization's values, mission, and commitment to California physicians. As a current CAP and MPT board member, I understand and

will continue to focus on addressing your needs and prioritizing the organization's ongoing growth and strength. CAP has proven since its founding that we can overcome the issues that threaten our practices and patients through powerful advocacy. Together, we will continue to champion the values of our profession and ensure that every one of us has the support and resources we need to care for our patients and remain independent.



Name: John J. Kowalczyk, DO, FACOS Medical School: Midwestern University Chicago College of Osteopathic Medicine Practice Location: Los Angeles, CA Specialty: Urology Years in Practice: 30 years CAP Member Since: 2005

As the vice chair of the CAP and MPT boards, it has been a privilege to serve you and all my fellow physician members. When I joined CAP in 2005, I found tremendous value in the benefits CAP offered to help me in my practice, and still do today. CAP is much

more than a provider of trusted medical malpractice coverage. It is an organization that protects physicians and their practices through services and resources that address barriers to care, patient safety, physician well-being, and practice success. In continuing my role on the CAP and MPT boards, it will be my solemn responsibility to work alongside my colleagues to increase these programs and fulfill the organization's mission to comprehensively protect you and the integrity of the enterprise.



Name: Meagan M. Moore, MD

Medical School: The Warren Alpert Medical School of Brown University Practice Location: Fountain Valley, CA Specialty: Obstetrics and Gynecology Years in Practice: 24 years CAP Member Since: 2001

There are 13,000 physician members who trust CAP and MPT to protect their careers, practices, and patients. This trust extends beyond excellent medical malpractice coverage to the unparalleled benefits and services built by physicians

for physicians. It is hard to find another organization or insurance company that can match the exceptional risk management and practice management programs, claims defense, legal support, and many other benefits that CAP and MPT offer to protect your best interests and peace of mind. It would be my privilege to continue serving on the CAP and MPT boards to keep developing these programs, ensuring you are surrounded by a physician community that empowers every member to thrive.



Name: Lisa L. Thomsen, MD, FAAFP Medical School: UCSF School of Medicine Practice Location: Glendora, CA Specialty: Family Medicine Years in Practice: 35 years CAP Member Since: 2003

As a long-time CAP and MPT board member, I am passionate about identifying resources that help solve our individual and collective pain points and promoting the value of membership. CAP must remain on its growth trajectory to amplify its ongoing

position in the marketplace as an organization that delivers the best medical malpractice coverage and services to California physicians. I am a dedicated CAP and MPT leader who is always committed to advocating for my fellow physicians and who will, during my next term, ensure opportunities to increase membership so we can celebrate the next 1,000 physicians joining our organization and beyond.

Case of the Month



Advance Directives: Who Holds the Ultimate Decision? Court Ruling Favors the Patient

By Rikki Valade, RN, BSN, PHN

In 1990, the Patient Self Determination Act was passed by Congress.¹ This legislation requires healthcare facilities that receive Medicare and Medicaid funding to inform patients about their rights to be involved in decisions about their medical treatment, as outlined by state law. It also directs healthcare providers to inquire about any existing advance healthcare directives, or offer patients information on advance directives. The National Cancer Institute defines an advance directive as "a legal document that states a person's wishes about receiving medical care if that person is no longer able to make medical decisions because of a serious illness or injury."²

The Greek philosopher Epictetus said, "No person is free who is not master of himself."³ An advance directive is fundamental to self-autonomy, an opportunity to assert control over our own lives, with the expectation that our end-of-life preferences will be honored and be inviolable.

In re Guardianship of L.A.C.

In this Case of the Month, In re Guardianship of L.A.C.,⁴ the court upheld the patient's advance directive despite challenges from the family. L.A.C., an Oklahoma resident, was suffering from progressive Parkinson's disease and dementia. In 2013, L.A.C. executed an advance directive stating she did not want her life extended by artificially administered nutrition and hydration. After losing capacity seven years later, L.A.C.'s sister and adult children filed competing actions to appoint a guardian for her in 2021.

The Court Ruling

An Oklahoma state-appointed emergency guardian approved the temporary placement of a percutaneous endoscopic gastrostomy (PEG) tube to provide nutrition and hydration until the court made a final ruling.⁴

The court determined that the PEG tube placement conflicted with L.A.C.'s advance directive. The sister filed an appeal, claiming that there was evidence showing that L.A.C. had revoked her advance directive from 2013.⁴ The Oklahoma Supreme Court ruled that an incapacitated individual has the legal right to cancel their advance directive, but that such cancellation must be proven with clear and convincing evidence. The court upheld the lower court's decision that L.A.C. did not cancel her advance directive, and that inserting a PEG tube went against the terms of her directive.⁴

The Oklahoma Supreme Court emphasized that court involvement should be a last resort when interpreting advance directives and in supporting the children and affirming L.A.C.'s advance directive. It ruled that once an individual has made their wishes known in an advance directive, those preferences should be honored without the need for court intervention, even in cases of subsequent incapacity.⁴

Challenges of an Advance Directive

Even though the above court case occurred in Oklahoma, it demonstrates the challenges associated with advance directives, which can be a source of confusion and complexity for healthcare teams to navigate here in California. Some challenges faced by the healthcare team include:¹

- Types of Advance Directives: Multiple types of advance directives exist, frequently intersecting in terms of coverage and timing of activation. The primary healthcare advance directives include the living will and the durable power of attorney for healthcare.
- Lack of Clarity: It is not possible for any advance directive to encompass all potential treatments for every medical issue in every imaginable scenario.
- **Communication Barriers:** Patients may have difficulty effectively communicating their wishes or providing clear instructions in their advance directives. Doctors may face challenges in understanding or interpreting the patient's intentions, which can result in confusion about the appropriate course of action.
- Varying State Laws: The legality and scope of advance directives can differ from state to state.
- Ethical Considerations/End-of-Life Decisions: Patients do not have the right to request treatments that are not medically necessary, may pose risks, or go against the healthcare provider's ethical beliefs.
- Family Disputes: Such as in the case of *In re Guardianship of L.A.C.*

Advance directives have their challenges, but they are an opportunity for a person to plan not just for a serious illness, but also the unexpected, and provide guidance to their loved ones and the medical team regarding their healthcare wishes and goals. Despite their importance, the Centers for Disease Control and Prevention (CDC) statistics indicate that only onethird of American adults have completed an advance directive.⁵ For these reasons and more, a healthcare provider should integrate advanced healthcare planning discussions into visits. In fact, there is a CPT code for these discussions.⁵ Please visit https://www. cms.gov/medicare-coverage-database/view/article. aspx?articleid=58664 for more information.

Risk Management Guidance

- Familiarize yourself with the laws in your state regarding advance directives.
- Engage in discussions about advance directives with patients to ensure they have a clear understanding of the purpose and implications of these documents. Open and honest communication is key in this process.
- Record all discussions about advance directives in the patient's medical records. This documentation helps to ensure that all healthcare providers involved in the patient's care are informed about their wishes.
- As a physician, it is crucial to honor and respect the autonomy of your patients regarding their advance directives. It is important to adhere to their wishes to the best of your ability.
- Encourage patients to regularly review and update their advance directive, especially in light of any changes in their health status or personal circumstances.
- Urge your patients to discuss their advance directive wishes with family.

Advance directives are crucial documents that allow individuals to assert control over their end-of-life preferences. In the case of *In re Guardianship of L.A.C.*, the court upheld the patient's advance directive despite challenges from the family. It is important for doctors to continually educate themselves on advance directives, seek legal advice when necessary, and engage in open communication with patients and their families to minimize confusion, assist patients in making informed decisions regarding end-of-life care, and ensure patient wishes are respected.

Rikki Valade is a Senior Risk & Patient Safety Specialist. Questions or comments related to this article should be directed to RValade@CAPphysicians.com.

¹House SA, Schoo C, Ogilvie WA. 2023, August 8. National Library of Medicine. "Advance Directives." https://www.ncbi.nlm.nih.gov/books/ NBK459133/

²National Cancer Institute. Dictionary of Cancer Terms. "Advance Directive." https://www.cancer.gov/publications/dictionaries/ cancerterms/def/advance-directive

³Spread Great Ideas. 2025. https://spreadgreatideas.org/quotes/ quotes-autonomy/# ⁴In re Guardianship of L.A.C., 553 P.3d 27 (Okla. 2024)

⁵Ervin, Y., Ludwick, M., & Valade, R. Webinar. Cooperative of American Physicians, Inc. June 2024. "Decisions Before Dilemmas: Empowering Patient and Limiting Risk Through Advance Care Planning." https://www.pathlms.com/capphysicians/courses/67613

Celebrating CAP's 50th Anniversary

In 1975, nine physicians formed CAP to address skyrocketing medical malpractice coverage costs. Today, CAP serves 13,000 California physicians with exceptional, affordable coverage and is proud to celebrate a 50-year legacy of stability and trust.

Request Your Free Commemorative Gifts



Visit **www.CAPphysicians.com/50YAGifts** to request your items.

Included are:

- Clear stadium tote bag
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MAY 2025



Commemorative gifts are available while supplies last. Limit one of each item per member.

RISK MANAGEMENT AND PATIENT SAFETY NEWS



HIPAA and Reproductive Healthcare Privacy

by Bryan Dildy, MPA, CPHRM, CPPS

On April 26, 2024, the Office for Civil Rights (OCR) published the *HIPAA Privacy Rule to Support Reproductive Health Care Privacy*.¹ The rule enhances the existing HIPAA Privacy Rule by prohibiting the use or disclosure of protected health information (PHI) related to lawful reproductive healthcare.¹ Specifically, it restricts healthcare providers and insurers from sharing information about legal reproductive healthcare where the requested purpose is to investigate or assert a civil, administrative, or criminal claim.¹ The rule took effect on June 25, 2024,¹ and required general compliance by December 23, 2024. A violation of the rule can lead to criminal liability.¹

Some have expressed concerns that the new rule will impact reporting of suspected abuse or neglect.² There are also concerns about the costs associated with updating Notice of Privacy Practices (NPP), policies, and staff training.²

Compliance with the new rule can be achieved by obtaining an attestation from the individual requesting PHI and updating the practice's NPP.

Attestation

The attestation requirement notes that healthcare providers who receive a request for PHI potentially related to reproductive healthcare must obtain a signed attestation that the use or disclosure is not for a prohibited purpose.¹ The attestation must be obtained if the request is for health oversight activities, judicial and administrative proceedings, law enforcement purposes, and coroners'/ medical examiners' disclosures.¹ The United States Department of Health and Human Services (HHS) has published model attestation language that will satisfy the rule's requirements and can be obtained at https://www.hhs.gov/sites/default/files/modelattestation.pdf.

Notice of Privacy Practices (NPP)

Healthcare providers should revise their NPP to support reproductive health care privacy.¹ The NPP should include a description of the new use or disclosure prohibitions. The compliance date for the NPP is February 16, 2026. Therefore, healthcare providers will need to ensure their NPP is updated and distributed to their patients. HHS has not yet published a revised model NPP.

Lastly, you should provide staff training on the rule requirements, NPP changes, and any procedural changes as it relates to the release of medical records. HHS has published several short videos on the HIPAA Privacy Rule and Reproductive Health, including a general overview and attestation compliance. These videos are available at https:// www.hhs.gov/hipaa/for-professionals/special-topics/ reproductive-health/index.html.

Training can also be accessed at: https:// evolveelearning.com/product/hipaa-training-coursecovered-entities/

CAP members can enter discount code **cap10off** to receive a 10% discount.

By implementing the attestation requirement, updating your NPP, and providing staff training, you can ensure that you are in compliance with this new HIPAA rule. An overview of the HIPAA Privacy Rule to Support Reproductive Health Care Privacy can be found at https://www.hhs.gov/hipaa/for-professionals/ special-topics/reproductive-health/final-rule-fact-sheet/ index.html. Bryan Dildy, MPA, CPHRM, CPPS, is a Senior Risk Management and Patient Safety Specialist. Questions or comments related to this article should be directed to BDildy@CAPphysicians.com.

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¹Health and Human Services. *Final Rule HIPAA Privacy Rule to Support Reproductive Health Care Privacy*. 2024, December 4. https://www.hhs.gov/hipaa/for-professionals/special-topics/reproductive-health/index.html

²Purl v. United States Dep't of Health and Hum. Services, et al., 2:2024cv00228 (D. Tex. 2024) at 13

Protecting Your Practice From Property Damage, Accidents, and Lawsuits

When it comes to your business, it may be overwhelming to evaluate the various areas that can put you at risk for an accident or lawsuit.

Now is the time to think about your risk mitigation plan and how you can protect yourself and your practice from fires, floods, injury, or other liabilities that can cause significant financial and business loss, such as practice closure and equipment repair or replacement.

While there are several mitigation strategies to implement to reduce your risk, the best protection to consider is a Business Owner's Policy (BOP), which combines a wide range of liability and property/ casualty coverage into a single package. Although these policies may be purchased or customized as individual policies, it is generally easier and less expensive to purchase them together.

A good BOP:

- Repairs or replaces damaged buildings, equipment, or other business property.
- Reimburses lost income or costs if the practice closes following a loss to property.
- Covers the cost of replacing or restoring damaged records or files due to a property loss.
- Pays for medical costs of individuals other than employees who are injured at your practice.

 Provides insurance against alleged claims of injury or damage caused by physicians or their employees (not from malpractice), including cost of legal defense and settlements.

SYMPHONY RISK

In addition to a BOP, you may also want to consider a hired and non-owned auto liability insurance, a commercial auto insurance coverage that protects businesses from liability for accidents involving vehicles they don't own but use for business purposes. This includes vehicles rented, leased, borrowed, or used by employees for work.

Get a Quote Now for a Business Owner's Policy!

If you do not already have a BOP, now is the time to explore options available to you through Symphony Health. PLUS, when you secure a BOP specifically with The Hanover Insurance Group through Symphony Health, you also receive water sensor technology with hardware and software provided at no cost—that sends you real-time alerts to prevent costly water damage.

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+Limit one/practice. Administrators only. Final test and survey must be completed. Gift card is provided and awarded solely at CAP's discretion.

*The Cooperative of American Physicians, Inc. is accredited by the California Medical Association (CMA) to provide continuing medical education for physicians.

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To Enroll: Practice Administrators enroll for 4.5 CE credits: www.CAPphysicians.com/SPM

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Instructions:

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1. Complete the required fields on the sign-up page to create your account on CAP's online learning portal or log in if you have an existing account

2. Once you have created an account and/or logged in, go to your dashboard. The available course names will be displayed under the heading "Catalog."

3. Administrators: Select "The Successful Practice Manager." **Physicians:** Select "The Successful Practice Manager – CME Version."

4. Click "Start" to begin. You can pause and return anytime, but modules must be completed in order and cannot be skipped.

5. After completing the program, download your certificate of completion and follow the steps to receive CE or CME credit.

By completing just six self-paced training modules from the convenience of your home or practice, you'll gain a solid understanding of the policies and procedures essential for maintaining a healthy bottom line and delivering excellent patient care.

For more information or if you need assistance enrolling, email MyPractice@CAPphysicians.com or call 888-870-1885.

Physician Association of California Sponsors Assembly Bill 1041 Health Care Coverage: Health Care Provider Credentials

By Gabriela Villanueva



The Physician Association of California (PAC) was established in November 2023 as an organization solely dedicated to advocating for independent physicians and small group practices.

During the current legislative session, PAC is sponsoring Assembly Bill 1041 (AB 1041)—Health care coverage: health care provider credentials. Introduced by Assemblyman Steve Bennett (D-Ventura), AB 1041 is aimed at minimizing redundancies by requiring healthcare service plans to assess and verify qualifications of a healthcare provider within a 90-day window. It also requires the creation of a standardized credentialing form to be made electronically available for completion and submission.

Learn more about AB 1041 at: https://leginfo.legislature.ca.gov/faces/billNavClient. xhtml?bill_id=202520260AB1041

PAC directly advocates with state legislators in Sacramento on issues that influence healthcare policies. The organization also regularly provides updates on legal and regulatory changes, offers continuing education, and helps its members stay connected with others in the medical field. The Cooperative of American Physicians (CAP) has worked closely with PAC since its inception. CAP members have automatic membership in PAC.

As physicians face unprecedented challenges that threaten their autonomy and ability to provide quality care, it is vital that lawmakers hear directly from leaders in the medical community and understand the critical role solo and small group practitioners play in our communities and in healthcare.

California's healthcare landscape is being shaped right now. As decision-makers craft policies that directly impact your practice and patients, your expertise and frontline experience as an independent physician are needed at the table.

Your voice is crucial in helping California legislators and their staff better understand how independent and private practice physicians provide high-quality care to patients, and the challenges you face.

-Matt Robinson, CEO, Physician Association of California

Get Involved With PAC

Email info@pac-md.org or call (916) 235-3487. If you'd like to learn more about your current membership in PAC and how you can support the endeavor, or be an active participant, please visit www.pac-md.org. On the website, you can sign up to receive their monthly newsletter with great educational information, legislative updates, and happenings around the Capitol.

Gabriela Villanueva is CAP's Government and External Affairs Analyst. Questions or comments related to this article should be directed to GVillanueva@CAPphysicians.com.



by Andie Tena

Get a Free Practice Assessment With *My Practice*

A regularly scheduled practice evaluation can help you stay ahead of policies and procedures that support optimal business performance and a healthy bottom line, even when you think your practice is running like a well-oiled machine. It may seem obvious, but clinical excellence aside, the care you provide for your patients may be impacted by the efficiency and effectiveness of your practice operations.

As an exclusive benefit of your membership, you have access to *My Practice*, CAP's free practice management and business services solutions program. In addition to being available for general practice-related inquiries, *My Practice* offers CAP members a free virtual practice management assessment.

An outsider's perspective can identify areas that need improvement to help your practice realize its full potential.

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An assigned practice management expert will review your evaluation and tailor recommendations to help boost your practice's operational performance and profitability.

Here's what you can expect to review during your consultation:

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- Patient communications management, and much more!

Practice management consultants are costly, and the results may not always meet your expectations. Through *My Practice*, you can take advantage of free practice management services, including your practice management virtual assessment.

My Practice was created as part of CAP's commitment to providing you with valuable products, services, and resources to support a safe and successful medical practice, so you can spend more time focusing on superior patient care.

You or any of your employees may contact Andie Tena, Assistant Vice President of Practice Management Services, at **ATena@CAPphysicians.com** or at **213-473-8630**, to get started with your free practice evaluation or to get help with any practice-related challenges, no matter how big or small.

MAY 2025

Andie Tena is Assistant Vice President, Practice Management Services, at CAP. Questions or comments related to this column should be directed to ATena@CAPphysicians.com.



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