

The Pulse

OF CATHOLIC MEDICINE



CATHOLIC
MEDICAL
ASSOCIATION

Spring/Summer 2017 ISSUE 1

MEDICAL MIRACLES

"The physical healing of individuals is still necessary to open hearts to the deeper reality of the spiritual healing we need. Physical healing opens us to conversion."

—DR. MARIE-ALBERTE BOURSQUOT,
CMA PRESIDENT

The Miraculous Healing
of a CMA Nurse

Tom English's Second
Chance at Life

The Power of
Prayer to Heal

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The 85th Annual Educational Conference in Review ■ 10



FEATURES



4 The Miraculous
Healing of
a CMA Nurse



6 Tom English's
Second Chance
at Life



8 Walking in the
Footsteps of the
Divine Healer



14 The Power
of Prayer
to Heal

IN THIS ISSUE

2 President's Message
3 Chaplain's Corner
12 Student Section

14 Resident Section
16 Guild News
20 Guild Photo Highlights



CATHOLIC MEDICAL ASSOCIATION



DEAR CMA MEMBERS AND FRIENDS,

It is my pleasure to introduce this issue of the Pulse of Catholic Medicine magazine to you. This issue addresses the theme of non church approved “Medical Miracles” in the practice of medicine. Suffering of every kind — medical, emotional, and spiritual — has existed since our original parents ate the forbidden fruit of the tree of good and evil.

Jesus was sent to heal humanity of the effects of original sin and reopen the gates of heaven. Stories abound in the New Testament of Jesus’ healing ministry. The physical healing of individuals is still necessary to open hearts to the deeper reality of the spiritual healing we need. Physical healing opens us to conversion.

Jesus’ healing ministry continues to this day through the healing professions, the sacrament of reconciliation, and the sacrament of the anointing of the sick. “Medical Miracles” or recoveries from ailments that are medically inexplicable are necessary to advance the cause of canonization for many saints.

In this issue we focus on those “Medical Miracles” in the clinical setting that are not publicly recognized nor investigated. Their purpose remains the same as those that are; to open us to personal conversion. As you read these stories, I invite you to reflect on the “Medical Miracles” you may have experienced in your own practice and then thank God that he chose to use you as his instrument of healing in these circumstances.

I encourage you to continue to strengthen your own spiritual life by maintaining an active life of prayer and frequenting the sacraments of reconciliation and Holy Communion.

God Bless You,

Marie-Alberte Boursiquot, M.D., F.A.C.P.
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DEAR CMA MEMBERS AND FRIENDS,

While Our Lord heals persons ordinarily through the application of the science of medicine in treating illness and disease, we know that sometimes He heals persons miraculously. We certainly hear of Jesus' miracles of healing in the gospels. Yet He still performs miraculous healings in our midst. And often does so through the intercession of Our Lady and the saints.

Recently, I and 12 others made a pilgrimage to Fatima and Lourdes that was organized by Dr. Kathy Raviele, the chair of the CMA's FIRE committee. We were blessed to have been able to bathe in the waters of Lourdes, which have brought miraculous healing to some ever since the spring of water started flowing in 1858 when St. Bernadette dug in the soil at the grotto of Massabielle at Our Blessed Mother's command.

On our pilgrimage, we were also graced to pray at the tombs of Blessed Jacinta and Francisco Marto, who will soon be canonized as the Vatican has accepted a miracle of healing for a Brazilian child that occurred through their intercession. Further, speaking of miraculous healing through the prayers of the saints, I am privileged to be acquainted with Dr. Ed Gatz, a member of the Omaha Guild, whose cure from advanced esophageal cancer over thirty years ago was the miracle accepted for the canonization of St. Jeanne Jugan. It is wonderful to not only hear of miracles that have happened through the intervention of a saint, but also to know personally someone who has been the recipient of such a healing.

Of course, there are numerous other miracles of healing that happen through the fervent and faith-filled prayers of persons, about which we might never hear. So, in this issue of The Pulse of Catholic Medicine, we have the opportunity to read about other miracles of healing that Our Good Lord in His love and mercy has granted. Jesus did not stop performing miraculous healing after He ascended to Heaven, but, in His promise to be with us until the end of time, he continues marvelously and miraculously to restore to health the infirm amongst us!

God bless you,

Fr. Gutowski

Fr. Matthew J. Gutowski
NATIONAL CHAPLAIN

The Miraculous Healing of a CMA Nurse

The Story of Linda Petote Martin

By
RENEE FOSS

LINDA PETOTE MARTIN KNOWS SUFFERING. FOR many years, she lived with a rare, incurable heart and lung disease that was the result of an autoimmune attack on her cardiac and pulmonary systems. Yet, as much as she knows suffering, she knows healing. She credits her miraculous cure to Jesus Christ's saving power and merciful love, and the Blessed Mother's efficacious intercession. Linda believed that Jesus could heal her, and He did; she lives to share her healing testimony with the hope that through it others may also come to know His Love.

Linda was born to devout Catholic parents in Rochester, New York. Her father, a Third Order Carmelite and daily communicant, died when Linda was a child. She describes her youth as one of steadfast devotion to prayer. In her adult years, Linda became a registered nurse, a Third Order Carmelite and a Eucharistic Apostle of Divine Mercy. She is married to Michael Martin, M.D., and they own and run Gladbrook Pediatrics, a Catholic pediatric practice in Rochester, New York. Both Linda and Dr. Martin are members of the Finger Lakes Guild of the CMA. Dr. Martin has been a board member since 2013, currently serving as the Guild's treasurer.

In 2001, about a year after giving birth to her fourth child named Claire, Linda became ill. Her illness worsened over the course of a few years.

"None of the doctors seemed to know what had happened to me," she recalled. "I could not walk or talk without severely slurring my speech; think clearly or hold a fork to eat; or brush my teeth or hair. I had burning pain, and sometimes had to look at my head to make sure it was not on fire. In other places of my body, I was numb and had no feeling, or strange abnormal feelings like pins and needles on my skin."

Initially doctors thought she had aggressive multiple sclerosis. They eventually correctly diagnosed her with the autoimmune disease known as Sjögren's Syndrome. It is considered a benign disease which results in dry eyes, nose and mouth – symptoms which Linda had for many years.

Occasionally, Sjögren's can mimic MS, and in rare cases it involves the breakdown of vital organs. Linda's case was one of those rare ones, and the disease ultimately caused her heart and lungs to fail.

"My husband is a physician, and being a nurse myself, we were both sad because we knew I was dying," she said.

At the height of her illness, she was on oxygen and confined to her bed. She did not have the strength to hold a Rosary, but she was constantly praying; she describes her prayer as an effortless "flowing" through her.

In 2006, Linda first saw the Blessed Mother in a dream.

She described her as having striking blue eyes, black hair and a tender smile.

In her dream she was taken to heaven. For miles, Linda could only see an otherworldly shade of blue, which she later realized was the same blue in Our Lady of Guadalupe's miraculous tilma. In heaven, Linda felt an ineffable sense of calm and peace; she feared that if she breathed, the beautiful feelings would pass.

"I never wanted to come back to earth. I was so happy," she said. "But, to earth I was meant to return, and to this day I am not sure if this was a dream, or a real happening."

Once Linda awoke, she was no longer afraid to die and longed for the beauty of heaven. Still, she begged God to heal her so that she could live to raise Claire.

"At least my older children knew me, and my strong faith, which I knew would serve them well on this earth, but I needed to live long enough for Claire to know me, remember me and my faith," she said. "Lying in bed, day after day, too weak to even open my eyelids, I felt sorry for my little girl, who would not remember her own mother. This was especially sad for me because my own dad had died when I was 6 years old. I barely remembered him, and have felt this loss every day of my life."

Linda was getting worse and continually invoked the Blessed Mother's intercession with a simple prayer she prayed for months:

"Show me that you are my Mother. If it be God's will, please intercede on my behalf and let me live to raise my Claire. Then, I will spend the rest of my life serving you."



Please, if you could, whisper in Jesus' ear like you did at Cana when there was no wine. At your request, Jesus performed His first miracle."

In Dec. 2006, she had a second dream.

"I had a dream where a certain understanding was given to me, that is, if I touched the chair that the Blessed Mother had sat in, then I would be healed. This was strange because I did not know that Our Mother had even sat in a blue chair on earth."

She told her husband about the dream, and he immediately recognized the chair. He told her that it was at the Chapel of Our Lady of the Miraculous Medal at the Rue du Bac in Paris, and that he had been there. Linda learned that the Blessed Mother appeared to St. Catherine Labouré at the Rue du Bac in a series of three visions including as the Virgin of the Globe and Our Lady of the Miraculous Medal. On July 18, 1830, St. Catherine entered the chapel and saw the Blessed Mother descend from the altar to sit in the director's blue chair. St. Catherine rested her head on Our Lady's lap as she revealed to St. Catherine many trials that would occur in France, the world, and in her own life. The Blessed Mother's final words in this vision were:

"Come to the foot of this altar. There graces will be shed upon all, great and small, who ask for them."

Later that month, her husband took Linda along with her oxygen and wheelchair, and baby Claire to France. They arrived in Paris on Christmas Day. Exhausted from the trip, Linda spent two days sleeping in the hotel room. Dr. Martin then took her and Claire to the Rue du Bac. They immediately saw the statue of the Virgin of the Globe, but there was no blue chair in sight. Instead a crèche was in its place. He asked the nuns if they could see the chair, but they replied that they did not know what had happened to it. Instead, Linda prayed for no more than ten minutes under the Virgin of the Globe statue, at the altar rail where St. Catherine had prayed; then they left.

Two months after her trip to France, Linda's health worsened; she was in heart and lung failure and suffocating to death. She described her condition as resembling a COPD patient that had smoked for decades, yet, she was not a smoker. Her husband called the Cleveland Clinic to talk to the head of the pulmonary department, and they agreed that Linda would need palliative surgery to remove the fluid surrounding her heart and lungs. On



Feb. 20, they drove through a blizzard and arrived at the clinic. They spent the night in a hotel inside the clinic so that Linda would not have to travel to and from the clinic in the freezing cold.

The hotel had three floor-to-ceiling windows surrounded by heavy steel and secured with heavy steel locks. Thus, it was particularly curious when Linda and her husband awoke the next morning, Feb. 21, to find one of the windows wide open.

"Did you open the window?" he asked her.

Not having the strength to talk, Linda answered in a whisper that she did not open the window.

"Mike, I think we had a visitation," she softly said.

At that moment her oxygen stopped working. She could not breathe. Her husband hooked her up to his emergency generator oxygen, but then that stopped working too. Immediately, Linda could breathe on her own and was overcome with an overwhelming sense of peace and calm. She knew it that moment that her prayers had been answered.

"How is this possible; what happened to you?" the doctors asked her, and continued, "There is no cure for this."

"Do you believe in God?" Linda asked. The room was so silent that she recalled one could hear a pin drop.

"I don't know," the head rheumatologist finally replied.

"Well, maybe today is the day that you do," Linda responded.

The doctors were speechless.

Inexplicably cured in such a manner that can only be described as miraculous, Linda returned to raising her family and assisting her husband at their pediatric practice. She shares her journey and love for the Blessed Mother with families at the medical practice and to other groups, such as Magnificat, a national and international ministry to Catholic women.

Linda's advice to those currently suffering or enduring a devastating illness or accident is to stay close to the sacraments of Reconciliation, the Eucharist and the Anointing of the Sick, which gave her much needed peace during her time of suffering.

"Pray, hope, and put your trust in God. Unite everything you do with Him," she offered. "I was not saved because I did anything special, but only so I might know God's merciful love, and so you might know it too."

Tom English's Second Chance at Life

By
ERIN MAGUIRE

TOM ENGLISH HAD recently awoken from a 13-day medically-induced coma when he told his wife, Susan, “My illness is less about us and more about God using us to touch other people’s lives.”

Necrotizing Fasciitis, a rare and often fatal flesh-eating disease, typically caused by group A strep bacteria, nearly claimed Tom’s life. But he survived through skilled medics and the power of prayer – inspiring even non-believing doctors. Perhaps St. Kateri Tekakwitha had heavenly sway.

On Nov. 6, 2016, more than 17 years after Tom’s recovery, the Englishs shared their story with health care professionals of the Grand Rapids Guild of the CMA. They were invited to speak at a guild event hosted after the Mass of Christ the Healer, the annual diocesan White Mass. Guild President James D. Hudson, M.D., and his wife Katie, organized the event and invited the Englishs, whom they knew from their parish, Immaculate Heart of Mary in Grand Rapids, Michigan.

“It was a compelling story and one that we as physicians don’t often hear,” Dr. Hudson explained. “It was very gratifying to see Tom, hear them both describe their experiences, and then to see them almost two decades later rejoicing in God’s healing mercy.”

The Englishs’ story, which Susan documented in her self-published book, *The Shadow of Death: Surviving Necrotizing Fasciitis*, details Tom’s illness, including dreams he had while in a coma, its impact on their family, and the support of their Catholic family doctor, Lee Begrow, D.O., and close-knit Catholic community.

“It’s amazing to still have my friend, who was almost snatched away, and see him biking, skiing in the Rockies,



and endurance sailing. It strengthens my faith,” reflected Dr. Begrow on his friendship with Tom. However, he vividly remembers the house call he made on July 14, 1999, when he sent Tom to the Emergency Room. He also shares this story with medical students regularly to make them aware of the symptoms and emphasizes holistic care to ensure underlying causes are not overlooked.

Tom’s illness manifested Monday, July 12, 1999 when he came home sick from work with a slightly sore throat and fatigue. By the next morning, he had developed an intense, localized pain just above his right knee, which was red and a little swollen. An avid biker, Tom initially thought he’d pulled a muscle; within a few hours, the swelling had subsided, but, the pain intensified.

Early Wednesday morning, Dr. Begrow sent Tom to the emergency room to check for a blood clot. That was ruled out, but, by now, Tom was in serious liver and kidney failure, his blood pressure was dropping and his vitals were becoming less stable. The doctors speculated necrotizing fasciitis, which was eventually confirmed by surgery later that evening.

“It was overwhelming. At noon, when they were still trying to find a diagnosis, I called family and friends. It helped to know people were praying,” Susan remembered. “I knew my job was to listen to the doctors and process what they

were saying. The community of prayer provided the support I needed to be able to focus on Tom.

At 9 pm on July 14, Fr. Peter Vu, former associate pastor of Immaculate Heart of Mary parish, led a prayer service in the hospital's nondenominational chapel, praying specifically through then Blessed Kateri's intercession on her feast day. Later, after Tom awoke from his coma, he asked for prayers from a friend in upstate New York who had received healing from throat cancer after visiting Bl. Kateri's shrine nearby. This friend sent Tom a relic of Bl. Kateri, which he wore, along with a Miraculous Medal, in the hospital.

Barely making it through the night, Tom's second surgery occurred during the Hour of Mercy, 3pm – while his parish gathered for a prayer service petitioning St. Jude, Patron of Desperate Causes. His vitals remained dangerously low following surgery and he was given less than a 10% chance of survival. Tom was kept in a drug-induced coma and received three more surgeries in the next four days removing more dead tissue.

The timeframe for surgery is critical in this disease and may have contributed to Tom's survival. Necrotizing fasciitis is the diagnosis for bacteria which infect fascia, connective tissues surrounding muscles, nerves, fat and blood vessels, and kill the tissue. Dead tissue must be cut away immediately to prevent the spread of the infection.

It is extremely rare for a healthy person like Tom to contract necrotizing fasciitis; the English's can think of no exposure to bad bacteria although his immune system was weakened after contracting an odd summer virus from the neighborhood children.

According to the Centers for Disease Control and Prevention, 700 to 1,100 cases of necrotizing fasciitis caused by group A strep occur yearly in the United States.

After nine days in a coma, Tom briefly opened his eyes and moved his fingers, but it wasn't until day 13 that he was deemed "critically stable." His children Mike, then 12, and Steve, then 9, visited their dad a few days after, seeing him for the first time since they said "goodbye" in the hospital. Joe, then 4, visited his dad a few weeks later, when Tom's tracheotomy was removed.

The English's son Ben was born after Tom recovered – another blessing.



With therapy and determination, Tom learned to walk again, regained his health, and even participated in a 100 mile bike race a year later. He suffers no serious effects from the disease, but its impact on others continues to bear fruit.

While in a coma, Tom dreamed he had suffered a train wreck. In the dream, Tom realized he couldn't move; there was nothing he could do and he put it "all in God's hands." Each part of the dream corresponded to tests and surgeries that had occurred, which fascinated the nurses who spent their breaks listening to Tom recount these amazing memories.

"The medical staff was so receptive to being God's instruments of healing," Susan said. "Tom's body was such a mess, but it seemed like the Holy Spirit was helping them to see a diagnosis that was not obvious."

Tom's illness happened in the summer, and doctors cycled in and out of Tom's case as they went on vacation. Many visited Tom when they returned. One doctor said, "I really didn't know if I'd see you after vacation. Medicine plays a part, science plays a part; the rest is in God's

hands."

While Tom had many helpful and positive doctors, one he called, "the rudest man I ever met."

This doctor finally visited Tom, sitting in a chair without making eye contact. Tom asked, "What's your opinion of all this?"

The doctor replied, "You are the worst case I've had in my career that's going to go home."

That doctor, his wife, and daughter were in attendance at Tom's Mass of thanksgiving the following fall.

Susan remembers the doctor's wife saying to her, "I don't know what you did or what happened, but it's different now." The doctor left the ICU and dedicated his career to palliative care.

The English's firmly believe that God spared Tom, and medics and friends continue to share how his miraculous healing impacted them. The English's appreciate even more the power of prayer and the gift of their Catholic community, but they do have one regret – not sending paperwork to Rome. Interestingly, in 2006, a Seattle boy named Jake also suffered from necrotizing fasciitis and prayed through the intercession of Bl. Kateri. His miracle was the cause of her canonization.

Walking in the Footsteps of the Divine Healer: Why We Need the CMA

By
AL OLIVA, M.D., F.A.C.S.

A FEW MONTHS AGO, I WAS IN THE DOCTOR'S LOUNGE of one of our downtown hospitals with a few other older physicians reminiscing about the "good old days" of medicine. We recalled how the physician's lounge used to have the Hippocratic Oath and the Physician's Prayer more visibly displayed. How the lounge was the place to discuss sports and politics with your colleagues. How it was the place to get advice on a difficult case and the place to pick up consults. We observed how the current generation of physicians barely said good morning, and were immediately glued to multiple devices watching electrons dash across digital screens. The Institute of Medicine reports that physicians spend 2 hours in front of a computer for every hour of direct patient care. A primary care physician recently told me that is incorrect. He claimed he spends more like 3-4 hours for every hour interacting with patients. Physician apathy is at an all-time high, and every specialty society has seminars on physician "burn-out." More physicians are seeking early retirement if they can, and for the first time ever, a majority of physicians would not recommend the practice of medicine to their sons or daughters as a career.

So what is going on? How could it be that in one generation we have gone from a profession, which most in my generation saw as a vocation, to the present profession, which can be likened more to a trade?

Well, there are numerous factors that come into play. Never-ending government regulation and compliance eat up so much of our time without any clear benefits for our patients. The Center for Medicare and Medicaid has publicly stated that by 2017, when MACRA – the law that

regulates government payment to doctors and hospitals becomes fully implemented – 87% of solo practitioners and small groups will go out of business. Why? Because the burden of reporting and compliance with MACRA cannot be afforded by small groups. Decreasing reimbursements and rising office costs make running a practice impossible. A recent article in the Wall Street Journal cites the law as the most important reason why hospital systems continue to merge and why physician groups continue to be absorbed by large hospital systems. Just look around. Is it any wonder then that physicians are apathetic and feel

disenfranchised? Maybe the medical profession is in danger of becoming a trade.

I wonder if what has happened to medicine is not the same that has occurred in our society and culture in general. We have jettisoned God from the public square and have likewise done so from our physician's lounge, our emergency departments, our operating rooms, and our administration boardrooms. Fyodor Dostoyevsky, writing his famous novel in 1880, *The Brothers Karamazov*, describes eloquently the results of exiling God from the public

square: to paraphrase Dostoyevsky 'in a Godless world, all actions become equally meaningless'. *All actions become equally meaningless*. This truth has been echoed numerous times by Pope Emeritus Benedict IV who warned us of the "tyranny of relativism."

And that, my friends, is why we need the Catholic Medical Association more than ever in medicine today. We need to be reminded daily that we care for broken human beings that have intrinsic value and have an infinite worth to God. We need to be reminded that we are not a trade but part of a great tradition of men and women who regularly transcend their own needs for the care of another. We need to be reminded that we walk in the footsteps of the Divine Healer. And that is



why this year the board of the CMA adopted a Vision Statement which states: “To inspire health care workers to imitate Christ.” All of us have experienced the joys of practicing medicine, along with the immense privilege and responsibility that comes with being able to share in someone else’s life on such an intimate level. However, that can only happen when we recognize the face of Jesus in our patients, who presents Himself in so many disguises, as Saint Mother Theresa used to say. We need an organization that can clearly proclaim the Gospel of Life. To unequivocally advocate for our patients who cannot speak for themselves; the poor, the elderly, the handicapped, the dying, and the unborn. To unequivocally declare in our society that human beings are not commodities, but are intrinsically valuable and have invaluable human rights, the most basic which is the right to life.

What other medical society can you belong to that makes any of these claims? The theme of last year’s national meeting in Washington D.C., was the Virtuous Physician. This year’s meeting will be in Denver and its theme will be Medicine in Service of the Family. The meetings are incredible, and will energize you to return back

to your practices with a new, different perspective, inspired by the Holy Spirit to proclaim the truth without fear.

I’m reminded of Deitrich Bonhoeffer, a Lutheran pastor living in Berlin at the height of the Third Reich. I

would recommend the book on his life by Eric Metaxas to you. The National Socialist Party had a problem with the Lutheran Church in general, because most Germans were Lutheran, and in particular with the Old Testament, because it was simply too “Jewish.” Remarkably, just about all of the Lutheran pastors folded and accepted the Nazi interpretation of the bible except a small group of pastors led by Bonhoeffer who banded together as the Confessing Church. Confessing meaning witness. Bonhoeffer was very active in the ecumenical movement in Europe and had left Germany many times to travel to Switzerland, England and twice to the United States. He could have easily escaped the Nazis, but he returned to Germany to support the other dissident pastors. He was ultimately executed in Flossenbug concentration camp on April 9, 1945. Bonhoeffer wrote: “Not to speak in the face of evil

is evil in itself. God will hold us accountable. Not to act is to act. Not to speak is to speak.” Is not the same true today?

That is why the CMA is very active legislatively in providing amicus briefs in court cases and lobbying legislators in the important issues of Life and Freedom of Conscience. As you may know, many of the conscience protection afforded by the Bush Administration were dismantled by the Obama administration. That is why great effort was made to pass the Conscience Protection Act. It passed the House of Representatives and is now in the Senate in the HELP committee. Because of the surprising election results, there is now hope

that this important bill can pass the senate and be signed into law. Hopefully, the Affordable Care Act can be amended such that the HHS Mandate will be dropped and the Little Sisters of the Poor can be left alone. We are also hopeful that the government will not again try to re-define what a religious institution is, as it did under former Secretary Kathleen Sebelius.

As you can see, there is a lot of work to be done. Yes, we can sit back and become despondent. Throw up our hands and just say “I’m a little guy. What can I do?”

But that is not in our tradition as Catholics. Saint Paul reminds us in his letter to Timothy “For God has not given us a spirit of fear, but of power and of love and of a sound mind.”

So I ask you to get involved. If you are

looking for a sign from the Holy Spirit, this is it. Be active in CMA committees. Be active in the local and state medical societies. As you know, if we are not at the table, we’ll surely be on the menu. So be a voice in defense of religious freedom and conscience protection. Be a strong voice for life. The challenge is to do it in kindness, with compassion and understanding.

Let the words of St. Paul to the Galatians inspire us now to persevere. St. Paul says “Let us not grow tired of doing good, for in due time we shall reap our harvest, if we do not give up.” (Gal 6:9)

Dr. Al Oliva, M.D. is a regional director representative to the CMA Board, and the president of the Spokane-Coeur d’Alene Guild in Spokane, Washington.



We need to be reminded daily that we care for broken human beings that have intrinsic value and have an infinite worth to God. We need to be reminded that we are not a trade but part of a great tradition of men and women who regularly transcend their own needs for the care of another. We need to be reminded that we walk in the footsteps of the Divine Healer.



Donald Cardinal Wuerl, Archbishop of Washington D.C., celebrates Mass at the National Basilica of the Immaculate Conception. (Marc Salvatore)



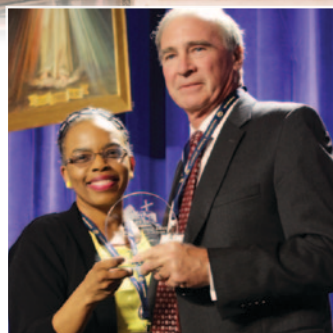
The Board's visit with the Papal Nuncio. (Marc Salvatore)



CMA Members at the White Mass. (Marc Salvatore)



Attendees enjoying the exhibits. (Marc Salvatore)



Dr. Marie-Alberte Boursiquot presents Dr. Paul Church with the Evangelium Vitae Award. (Marc Salvatore)



St. John's Bible, Conference Sponsor. (John Hartman)

Witnesses to Virtuous Medicine

By
MARIO R. DICKERSON, M.T.S.

SEEING APPROXIMATELY FIVE HUNDRED CMA MEMBERS, many in their white coats, participating in Mass at the National Basilica of the Immaculate Conception in Washington, D.C. was a beautiful witness to the grace of God working in health care. It is even more beautiful when one is cognizant that all of our 2,300 members were with us in spiritual communion.

The 85th Annual Educational Conference held from Oct. 13-15, 2016 at the historic Omni Shoreham Hotel was unique and memorable for many reasons. Dr. Marie-Alberte Boursiquot and her planning committee had decided to focus on the joy and calling of the physician and focused

the theme, "Virtuous Medicine, the Joy and Privilege of the Catholic Physician," on Pope Francis' apostolic letter *Evangelium Gaudium*.

All of the presenters were high caliber, nationally recognized experts in their medical specialty or academic fields. The "Question and Answer" roundtables provided advice to practically applying the subject matter. Perhaps the most rewarding aspect of the conference was the retreat like atmosphere with group rosary, confessions, Mass, opportunity to pray in the adoration chapel, and visits to nearby shrines.

It was not lost on any attendees that we were in the nation's capital one month before a presidential election, with Americans keenly focused on the future of health care. We were grateful to have among the speakers Rep.



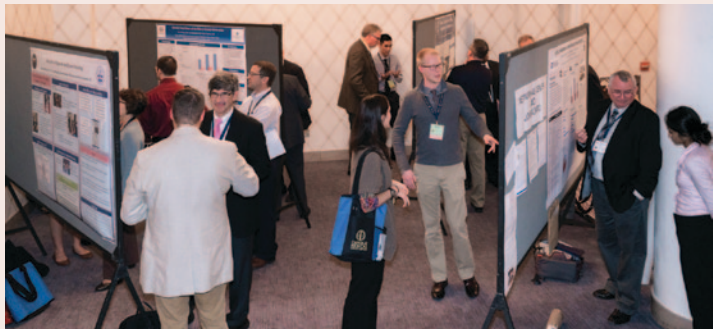
Dr. Peter Morrow speaking at Holy Alliance Dinner. (Marc Salvatore)



Bishop Dennis Madden, Auxiliary Bishop of Baltimore, delivers homily, and Bishop Robert Vasa, past CMA Episcopal Advisor, serves as concelebrant. (Marc Salvatore)



National Chaplain Fr. Matthew Gutowski with Sr. Mary Diana Dreger, O.P., M.D., Episcopal Advisor Bishop James Conley and Sr. Mary Sarah, O.P. (Marc Salvatore)



Presentation of Academic and Scientific Posters. (Marc Salvatore)



Q&A Session with George Weigel, Dr. Greg Burke and Rep. Andy Harris, M.D., and moderators Dr. Louis Breschi and Anne Marie Carpenter. (Marc Salvatore)



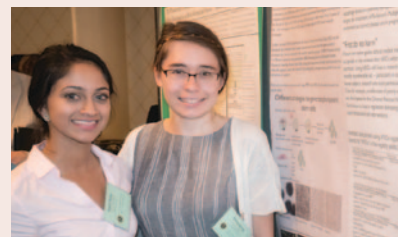
Ralph Martin, Keynote. (John Hartman)



President Dr. Marie-Alberte Boursiquot speaks to Papal Nuncio Archbishop Christophe Pierre as her father, Deacon Jean Baptiste Boursiquot, looks on. (Marc Salvatore)



Speaker Mike Aquilina presents on the historical roots of hospitals. (John Hartman)



Medical students Tejasvi Peesay and Antanina Voit present their poster abstracts. (Marc Salvatore)



Florida CMA members enjoy the opportunity for fellowship. (John Hartman)

Past President Dr. Les Ruppersberger and Board Member Dr. Michael Parker share a moment of levity. (Marc Salvatore)



Tennessee medical students by their poster. (Marc Salvatore)

Andy Harris from Maryland, who is also a physician. Additionally, the Health Care Policy Committee, under the leadership of Dr. Steve White, arranged for a Health Care Forum, prior to the start of the Conference for legislators, bishops, physicians, and other key persons. The fruits of the conference and these meetings, continue to manifest themselves today.

One of the social highlights of the conference was the opportunity for fun and networking aboard the Spirit of Washington dinner cruise. As we traveled down the Potomac River enjoying fine food, music, and dancing, we were treated to spectacularly lit monuments, including views of National Harbor, the Capitol Dome and the Washington Monument.

The inspiring keynote from Dr. Ralph Martin on the

importance of evangelization in health care, was a fitting follow-up to the White Mass at the Basilica of the National Shrine of the Immaculate Conception. There is no doubt that attendees left the conference to return to their patients, places of work, parishes, and families, with a rekindled joy in their calling to uphold virtuous medicine.

The CMA is very grateful to our many sponsors, advertisers, exhibitors, and donors who helped us keep registration fees to a minimum and also fund scholarships and other key programs.

We hope to see you at the Conference in Denver, Colorado this year Sept. 7-9th. The theme is "Medicine at the Service of Marriage and Family: Transforming the Culture with Love and Truth." Please visit the "Events" tab of our website for more information.



BE NOT AFRAID

BEING A WITNESS TO YOUR CATHOLIC FAITH DURING RESIDENCY INTERVIEWS

INTO DARKNESS: Applying to Diagnostic Radiology and Upholding the Dignity of your Patients

By
RYAN KELSCH

THERE IS A DEEP TEMPTATION IN DIAGNOSTIC radiology of depersonalization. The images have no faces: no fear, no joy, no sadness. Yet, I know it is my vocation.

I came to radiology as a last hope. During my third year I sampled just about every specialty and never felt fulfilled. It was not until I arrived at radiology did my heart finally stop yearning and I realized, despite my hesitations, it is where my vocation lies.

There is a tough decision that most people of faith are required to make when they submit their residency application; that is whether to mention faith or not, and to what extent. Most advise to leave it out entirely, as any chance a selection committee gets to discriminate between applicants they will take, and why risk someone discriminating based on faith. I advise the complete opposite: if your faith is what is most important to you, plaster it across your application. I received residency applications from prestigious secular and Catholic institutions across the country appropriate to the competitive level of my application. I could not spot a speck of discrimination, and even at places where that was the case, I don't think those places would be institutions I would want to end up anyway. I wanted my faith to be welcomed wherever I was going to spend the next 4-6 years.



I always brought up my Catholic faith at every one of my interviews. Rarely did I meet resistance. At almost all of my interviews there was at least one Catholic interviewer waiting eagerly for me to utter something vaguely religious, lifting the interview rules and letting us talk freely about faith. I had interviewers tell me about their conversion stories, ask me questions on medical ethics, and chat about how faith influences their practice. In all this my intuition about radiology being able to move past the austerity of

the computer screen was confirmed. To see practicing radiologists enthusiastically agree about retaining the dignity of each person we view the images of and the challenges that surround this was powerful, and I don't think I would have had any of those conversations unless my application was so blatantly Catholic.

In many ways this quote from C.S. Lewis' "Till We Have Faces" echoes radiology's challenge:

"I saw well why the gods do not speak to us openly, nor let us answer. Till the word can be dug out of us, why should they hear the babble that we think we mean? How can they meet us face to face till we have faces?"

In a similar way that we can never attempt to understand God's perfect wisdom unless we become aligned with Him, we will never be able to relate to our patients if they remain faceless. We must look deep into each patient we are trusted with and see them for the complete person they are.

So I leave you with this: whatever field you are applying to, see the faces of your patients and be unwavering in your faith.

ON THE FRONTLINES:

Applying to OB/GYN and Genuinely Living the Faith

By
LINDSEY MARUGG

FOR EVERYONE WHO IS ALREADY WORRIED ABOUT being Catholic and interviewing for residency, I can now tell you that I had far fewer issues than I ever imagined I would. Everyone should have an individual approach to this, so I offer mine only as an example. Since I am applying into Ob/Gyn, a field where many times there are accommodations that need to be made for Catholics daily, I decided I wanted to be as transparent as possible with my Catholicity. I included my involvement with the Catholic Medical Association, the posters I presented at CMA conferences, and prominently placed the

paper I published in the Linacre Quarterly so that it could get the recognition it deserved on my application.

As a bit of insight into how things went for me, I applied to 20 programs, got interview invites at 14, and went on 10 interviews. I am an average medical student as far as grades and test scores go, but I did make research, volunteering, and extra-curriculars priorities throughout medical school.

Going into the process, I decided that I would only discuss my concerns about not wanting to participate in abortions, sterilizations, or prescribe contraceptives with the program directors. While this tactic worked very well for about half of the programs I interviewed, there were some people that

continued on p19

2017 STUDENT SECTION LEADERS AND CHAPTERS



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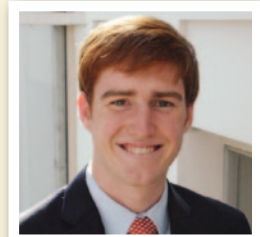
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THE POWER OF PRAYER TO HEAL

By
JENNIFER PERONE, M.D.

THE TWO OF US STAYED BY HIS BEDSIDE ALL night, keeping silent vigil with barely a word exchanged: she with her Bible, and me with my ABGs and dialysate numbers. Miguel was 4 years old and had been flown in from Mexico only a few hours before, severely burned with multiple system organ failure – his kidneys and lungs were not working with signs of sepsis setting in.

I spent all night stationed outside his door, adjusting his vent settings, watching as his peritoneal dialysate returned less and less while his body, thirsting for fluid, retained more and more. At one point when I went in to examine him more closely she looked up at me, her eyes pleading for reassurance, “Doctora, el va a sobrevivir?” I wanted to be able to tell her yes her son would survive, but I really didn’t know. Seventy percent total body burn and multi-system organ failure did not bode well, but he was young and there was always hope.

In my less than perfect Spanish I replied, “I hope so, but

really I don’t know. He is very sick.”

She nodded slightly and held back tears, then turned back to her Bible. We spent the whole night together at his bedside, both of us praying – her more visibly and me less so, but silently saying, “Please Lord, don’t let him die. Please help me keep him alive until morning.”

He survived until the morning, and was miraculously stable enough for debridement. They wheeled him back to the operating room and I finished my sign out; exhausted and ready to go home. Walking out, I saw his mother sitting in the waiting room, all alone looking scared. As tired as I was, I had to stop. I sat down with her and attempted to reassure her.

“He’s in good hands,” I told her. “We are going to do everything we can.”

They tell you in medical school that you should not pray with a patient unless they ask you to, but there she was, looking so scared and alone. Maybe it was because we were speaking Spanish so I was less nervous about people overhearing me or maybe it was exhaustion that kept me from fighting the Holy Spirit, but to my surprise, I found myself asking: “May I pray with you?”



2017 Resident Section Leaders



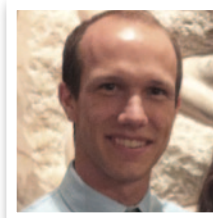
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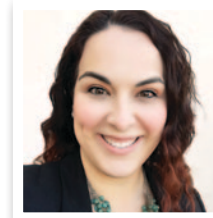
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“Yes,” she replied. We bowed our heads and held hands, completely isolated from the rest of the world for those few minutes, and I prayed. I prayed for this mother, so scared and alone and worried about her baby. I prayed for her son, for his safety, for his healing, and for his soul. I prayed for the doctors and nurses, myself included, for wisdom and peace in the middle of such pain and sadness. When I was done we were both crying, she hugged me and I told her one last time: “All will be well.”

I went off service the next day, moving on to the next family that needed me. For the first few days I thought of them all the time, wondering how they were doing, but soon I was consumed with the patients on my service who needed my attention. Over the next few months I thought of them occasionally, usually on Wednesday mornings at the Morbidity and Mortality Conference, whenever a burn victim would be presented, praying it was not him.

About six months later I was walking through that section of the hospital to see one of my co-residents and saw a group of 4 children all wearing their compression garments and face masks, laughing and playing together in the lobby. Among them was the most adorable boy with a round face and a joyful smile. I couldn’t help but notice him. I smiled, waved, and went along my way. As I was leaving to return to the adult hospital I heard a voice calling:

“Doctora! Doctora! Espera!” I turned around and there

she was, Miguel’s mother. “Where have you been? I’ve been looking for you for months now!” she said in Spanish.

Shocked, I replied, “I’m sorry, I went off service to a different part of the hospital. How are you?”

She smiled and said “Did you see him? Did you see Miguel?” She turned and gestured to the adorable round faced boy I had just been watching.

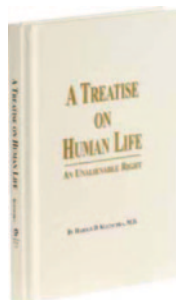
I could not believe it, he was so changed. I never would have recognized him. My eyes welled with tears – he was alive and doing really well. She hugged me and then continued:

“I wanted to say thank you. You were a gift from God that day. I was scared but then you prayed with me, and God gave me such peace. Your words were exactly what I needed to hear. I wanted to thank you for letting God speak through you and for being there for me.”

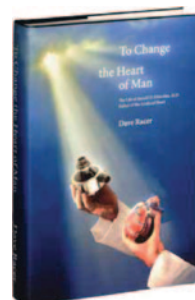
I stood there dumbfounded for a minute or so; I do not remember my reply although I am sure they were probably some words of gratitude and joy that he was doing so well. However, as I left her, I do remember marveling at the power of our God. Marveling that when we listen and act in spite of our fears, He can work through us and He can speak through us. He helps us as physicians to attend not just to the physical suffering, but to the emotional as well. Miguel’s healing was not an overnight miracle, but it did teach me the impact of prayer and being open to the Holy Spirit.



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FLORIDA

St. Gianna Guild of North Central Florida: Outstanding Guild of the CMA

THE ST. GIANNA GUILD OF NORTH CENTRAL Florida is the guild to follow this year.

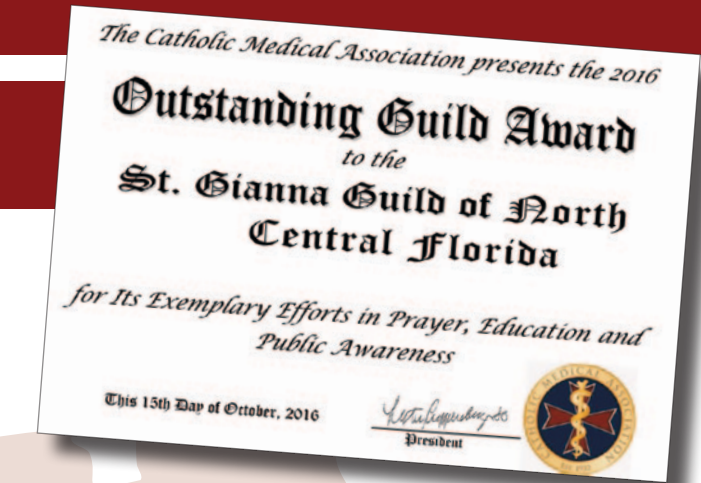
They are the new CMA's Outstanding Guild Award recipients for the "quality and quantity of their efforts to fulfill the CMA's mission locally while providing new ideas and resources" for other guilds. President Angeli Akey, M.D., accepted the award on behalf of the Guild at the 35th Annual Educational Conference held in Washington D.C. this past fall.

The St. Gianna Guild was started as a response to the HHS Mandate five years ago. Since then the guild has grown to over sixty members. The core group is comprised of about a dozen members who attend the monthly meetings, and who passionately work to spearhead initiatives that advance the CMA on the local and national level.

"We have focused on the teachings of St. John Paul II and have been blessed with members that are passionate about different areas," explained Dr. Akey in her application letter.

Those areas include serving the homeless, pro-life activities and ending the death penalty, as well as advancing health care rights of conscience both on the state and national level.

The Guild has been particularly instrumental to the St. John Paul II CMA Medical Student Section at the University of Florida since its inception over two years ago. The Guild funded two students to attend and present their poster abstracts for the CMA contest at the Philadelphia CMA conference in 2015, with one of those students winning first place. The Guild also funded a natural family planning program for the medical students at UF, with another program on Humanae Vitae in the works. The Guild hosts an annual pilgrimage to Our Lady of La Leche Shrine for students and health care



personnel, and is working on a case based handbook for medical students called "Conscience Collisions."

The Guild held its first Hippocratic Oath Ceremony last spring, and holds an annual St. Luke White Mass for local medical professionals and students every fall. New for 2017, the White Mass will be combined with a training day for post abortive counseling for health care workers. The St. Gianna Guild is also helping two other CMA guilds get started in the Diocese of St. Augustine per the request of their Bishop Felipe J. Estévez.

The leadership and dedication of guild members has been recognized by others as well. Dr. Akey received the St. Gianna Molla Award for her pro-life work from A Woman's Answer Medical Center at their Feb. 20, 2016 Banquet for Life. And Dr. Maureen Curley, Ph.D., A.R.N.P., who

works with Rachel's Vineyard in post abortive care of women, was placed on the Diocese of St. Augustine Bishop's Committee. Also at the last CMA conference, Dr. Joseph Thornton, the Florida state assistant director, Anne-Marie Carpenter, University of Florida's St. John Paul II CMA student section president, and Dr. Akey co-authored and presented at the CMA poster abstract contest regarding



Guild President Angeli Akey, M.D. with University of Florida's St. John Paul II CMA-SS President Anne-Marie Carpenter, and CMA's Florida State Assistant Director Joseph Thornton, M.D. stand next to their poster at last year's CMA conference.

the death penalty and how it violates physician integrity, taking first place in the scientific/academic category.

The St. Gianna Guild members will be presenting at the Mid-Year Meeting this June, where they will share some of the ideas and resources that led them to receive this CMA recognition, but more importantly so that whatever best practices they have gleaned over the years may help strengthen other guilds, and the CMA as a whole.

SPOKANE, WASHINGTON

Walk for Life Northwest

By

AL OLIVA, M.D., F.A.C.S.

PRESIDENT, SPOKANE-COEUR D'ALENE GUILD

THE SECOND ANNUAL WALK FOR LIFE NORTH-west occurred on Jan. 28, 2017, the day after the national March for Life in Washington D.C., drawing hundreds of people in solidarity for the cause of life.

“The prolife movement is about love,” said Bishop Thomas A. Daly of the Diocese of Spokane. “It’s about embracing all people in God’s plan.”

Bishop Daly concelebrated the Walk’s Mass that kicked off the event with his brother priests and deacons at the Cathedral of our Lady of Lourdes. During his homily he asked those in attendance to consider if “we are merely admirers of Jesus Christ and His teachings or followers and disciples who know that this path will not be easy.” He stated that confronting the culture of death in society will not be easy, but that it is what the Gospel demands of all Christians. Recalling the words of Pope Francis, Bishop Daly added that “all life has inestimable value, even the weakest and most vulnerable, the sick, the old, the unborn and the poor” because they are “masterpieces of God’s creation, made in his own image, destined to live forever, and deserving of the utmost reverence and respect.”

After Mass, participants gathered at Riverfront Park to listen to Rev. Walter Hoye II, a pro-life Baptist minister who spoke at the national CMA meeting in Santa Barbara. During his address to the Walk participants, Rev. Hoye recalled an episode during his sidewalk counseling when he engaged a young African American woman in front of an abortion clinic. He held a simple sign that read ‘God loves you and your baby’. The young woman, alone and afraid, wanted



to know if that was really true. Rev. Hoye spoke with her about God’s love, but despite his best efforts the woman proceeded into the abortion clinic. She appeared disoriented when she came back out, he said. She wanted to know if God still loved her. He assured her that God would always love her, regardless of what she had done. He used the story to highlight to the crowd that the prolife movement is all about love.

The Students for Life from Gonzaga University led the peaceful walk through 20 city blocks in downtown Spokane while chanting ‘We are the Pro-Life Generation.’ Not far behind was the Spokane-Coeur d’Alene Guild carrying a CMA banner. The walk returned back to Riverfront Park where impromptu singing of God Bless America, Amazing Grace, and other hymns took place. Spokane Police estimated the crowd at 1,000 people. Communities from neighboring states Oregon, Idaho, and Montana also walked. The January weather was more hospitable this year. Although still cold, the sun shone through during the walk, which drew the attention of all three local TV news organizations and the city newspaper, which printed a front page article.

The Spokane-Coeur d’Alene Guild members were part of the planning committee, and provided logistical support, set up the stage, the sound system, the information tent, and manned the first aid station. The Guild also helped with fundraising, and looks forward to assisting in next year’s Walk for Life.

Bioethics & Legislative Conference and Retreat

By
DIANE T. GOWSKI, M.D.
FLORIDA STATE DIRECTOR

THE FLORIDA GUILDS OF THE CMA HOSTED ITS 2nd annual retreat and Bioethics & Legislative Conference Feb. 2 to 5, 2017 entitled “Witnessing to Truth and Virtue on the Battlefield of Medicine” at Saint Leo Abbey in Saint Leo, FL. The conference moderator Fr. Scott Francis Binet, M.D., M.I., a region V co-director, and retreat master Fr. James Kelleher, S.O.L.T. of Our Lady of Corpus Christi Church, Texas, provided for an uplifting weekend full of graces and renewal. The aim of the conference and retreat was to strengthen the unity between the Florida guilds to work together on a state level. Attendees included physicians, medical students, health care professionals, spouses and lawyers.

The retreat day was comprised of Rosary, Mass, inspiring talks, Adoration with the Saint Leo monks and time for fellowship.

Conference speakers were from Alliance Defending Freedom, Patients Rights Council, Pope Paul VI Institute, Florida Conference of Catholic Bishops, Florida Right To Life, and Canadian and Florida CMA members. We were updated on a variety of topics including Gender Dysphoria, Conscience Protection and Religious Liberty, Physician Assisted Suicide and Euthanasia, Florida state legislative updates, and Post Abortion Syndrome.

The weekend concluded with a brief meeting with Florida guild presidents and the conference moderator for reviewing the organizational efforts along with future plans and goals to continue to expand the presence and work of the Catholic Medical Association in Florida.



felt by including things that showed I was Catholic on my application meant they could ask me how it would affect my day-to-day life as a resident. I can say that every single time it came up, whether it was by me or an interviewer, I was able to explain myself thoroughly and succinctly and in a way that showed them I

cared about patients, and I was not trying to bar these things from their hospitals. I simply didn't want to directly participate in a few select things. I emphasized that I always wanted to learn about everything, and that I find

being able to counsel patients on the risks and benefits of all their options is a skill that is necessary, regardless if I do the procedure, write for the prescription or not. And at the end of every conversation, the person said something along the lines of "that all sounds reasonable and I think we could accommodate you here."



The more real and honest you can be, the better applicant you will be. They want the real you, not a show. Don't be afraid to give them you.

Many programs had residents with religious backgrounds that had requested to not participate in similar procedures and were familiar with protocols for such things, but there were a couple programs that indicated they had never encountered a resident who required these kinds of accommodations. And for them, I offered to go through a couple scenarios so that they could get a better picture of what I was asking from them.

I tended to start with a scenario where a patient requested birth control, because I thought that was where they were most concerned. I walked them through the scenario, and often I could see them relax as I explained how I

would handle it and which parts I would opt out.

As I did more of interviews, sometimes after having this discussion, the person would tell me that they are Catholic too. Often, they had different beliefs about how and when the Ethical and Religious Directives for Catholic Healthcare (known as the ERDs) are applied in their own practice, but it was amazing to me to see how many Catholics were out there. Hopefully I was also able to witness to them that following the ERDs is possible, even as a resident. Maybe they have never seen that before. I pray I was a witness during my short time with them.

At the end of this whole process, while the first couple conversations about contraception were difficult, I now have that skill pretty well locked down in my tool box. Repetition is very good for that, and it always helps to have the Holy Spirit in my corner.

Every field is different, every program is different, and every program director is different. And a lot of "Catholic" hospitals treat the ERDs in different ways, especially when they are owned by non-Catholic health systems. Don't be afraid to ask the hard questions, even if you don't include anything Catholic in your application. This is your residency, your future learning environment. You have to find what works for you. And the programs will appreciate your honesty and willingness to ask the difficult questions because that is a way you can prove that you will be a good fit for their program. The more real and honest you can be, the better applicant you will be. They want the real you, not a show. Don't be afraid to give them you. Be not afraid.

SAVE THE DATE FOR CMA JUNE EVENTS

► June 1-4, 2017:

Mid-Year Meeting at Mundelein Seminary, Mundelein, IL

If you are a guild officer, a guild member who would like to become more active, or a medical professional thinking about forming a guild, then this meeting is especially for you. It will provide you with the tools and skills necessary to further expand the work of the CMA. For more information please visit: www.cathmed.org/events/mid-year-meeting

► June 19-25, 2017:

Medical Student Boot Camp at St. Charles Borromeo Seminary, Wyncwood, PA

The Boot Camp is a several-day intensive formation experience of prayer, study, practical training, and mentoring for medical students by leading CMA physicians, priests, and moral theologians.

For more information please visit: www.cathmed.org/events/medical-student-boot-camp



The Message, Diocese of Evansville

BISHOP CHARLES C. THOMPSON, LEFT, BLESSES LUCY ANN DEWEES, 7-MONTHS, AS HER FATHER, AARON DEWEES, M.D., PREPARES TO RECEIVE HOLY COMMUNION DURING THE OCT. 12 WHITE MASS. DR. DEWEES IS A NEONATOLOGIST WITH ST. MARY'S MEDICAL GROUP IN EVANSVILLE, INDIANA.



THE ST. THOMAS AQUINAS GUILD CELEBRATED THEIR ANNUAL WHITE MASS AND HELD THEIR ANNUAL MEETING ON OCT. 1, 2016. BISHOP MARTIN AMOS OF THE DIOCESE OF DAVENPORT, IOWA CELEBRATED THE MASS. DR. WES ELY OF VANDERBILT UNIVERSITY MEDICAL CENTER PRESENTED AT THE MEETING ON PHYSICIAN-ASSISTED SUICIDE. PICTURED LEFT TO RIGHT: BISHOP MARTIN AMOS, DR. WES ELY AND GUILD PRESIDENT DR. TIM MILLEA SPEAK AT THE MEETING.



THE PALM BEACH PHYSICIANS GUILD OF THE CATHOLIC MEDICAL ASSOCIATION HAD AN EXHIBIT TABLE AT THE ANNUAL DIOCESAN CATHOLIC MEN FOR JESUS RALLY, WHERE GUILD PRESIDENT FELIX A RODRIGUEZ M.D. AND GUILD SECRETARY JOAN KISHEL, M.D. ANSWERED QUESTIONS AND PROMOTED THE CMA.



MARLENE QUARONI | Florida Catholic

ASHLEY MILA, A FLORIDA INTERNATIONAL UNIVERSITY (FIU) MEDICAL STUDENT, AND VICTOR MOAS, PRESIDENT OF THE UNIVERSITY OF MIAMI CHAPTER OF THE CATHOLIC MEDICAL ASSOCIATION, BROUGHT UP THE OFFERTORY DURING THE WHITE MASS FOR MEDICAL STUDENTS AND PROFESSIONALS CELEBRATED NOV. 13 AT ST. AUGUSTINE CHURCH AND CATHOLIC STUDENT CENTER IN CORAL GABLE. THE STUDENT CENTER IS ADJACENT TO THE UNIVERSITY OF MIAMI. THE FIU HERBERT WERTHEIM COLLEGE OF MEDICINE, WHICH OPENED IN 2009, RECENTLY FORMED A CMA CHAPTER.

Bringing Joy through Healing

Today's world has left many wounded physically, spiritually and emotionally. It is easy to get lost, but the CMA is helping many return to peace and wellbeing.

Your support of the CMA helps to restore hope and bring joy. Whether it is through the media, working to change policies, educational events, evangelizing health care, forming a new generation of leaders or raising awareness on important issues, the CMA is making a difference and re-establishing joy.

Ours is a profound joy that goes deeper than a smile; rather it lights a fire within, bringing peace to the soul. We have all experienced that kind of joy. Now is the time to share it with others.



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