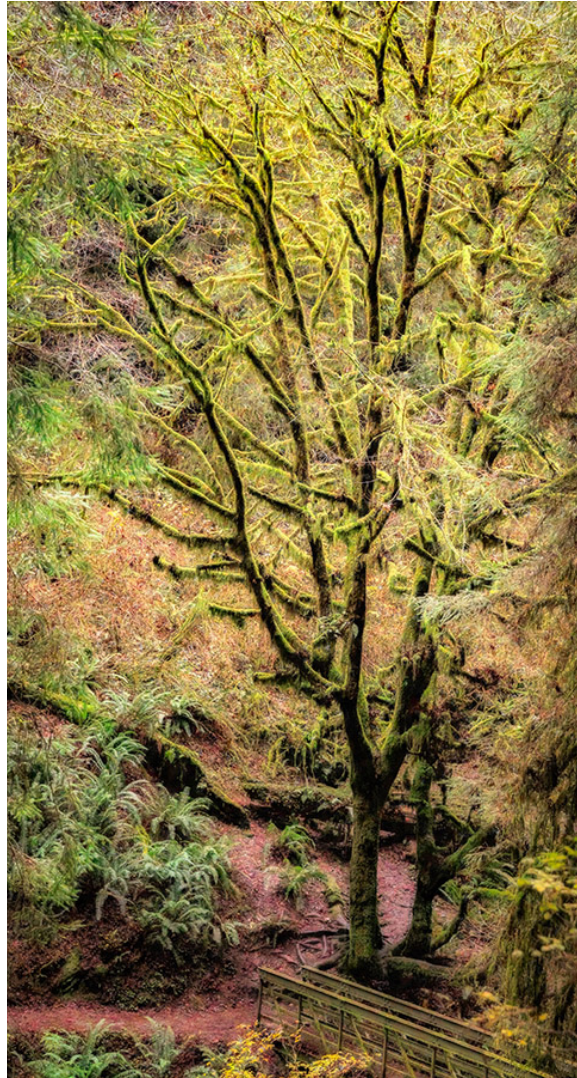




**HUMBOLDT-DEL NORTE
COUNTY MEDICAL SOCIETY**

North Coast Physician

OCTOBER 2024



Cardiac Surgery at Providence St. Joseph Eureka
Hospital.....

CMA Legislative Round up.....

Fall Family BBQ Photos.....

and more.....

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October Cover Photo:

"SPIRIT TREE"

Stephen Kamelgarn, M.D.

North Coast Physician is published monthly by the **Humboldt-Del Norte County Medical Society**, 3100 Edgewood Road, P.O. Box 6457, Eureka, CA 95502. Telephone: (707) 442-2367; FAX: (707) 442-8134; E-Mail: hdncms@gmail.com
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Open Forum

Cardiac Surgery at Providence St. Joseph Eureka Hospital Joseph Arcidi, M.D.

Q: It seems that there are a surprising number of people in Humboldt and Del Norte counties who are unaware that Cardiac Surgery is even performed in Eureka. Tell us about yourself and what brought you to St. Joseph Hospital.

A: You know, Amanda, that has been the opening slide in the 30 community presentations I've given since I became Medical Director, going on 4 years now – that people don't have to go the Bay Area to receive high-quality open-heart surgery!

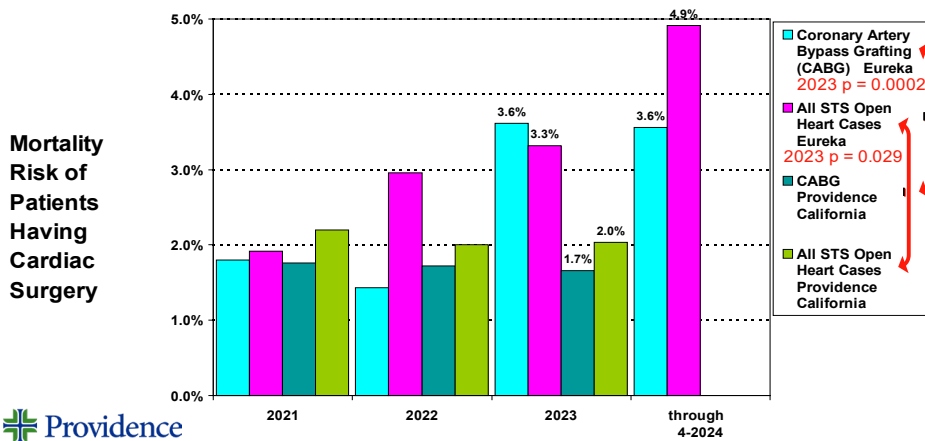
I have been a cardiac surgeon for nearly thirty years, with an academic background at Michigan State University as well as leadership positions in private practice. The Cleveland Clinic was an important part of my training. I was recruited over a period of 9 months by a previous Providence Chief Executive to revamp the program. Neither my wife or I had ever been north of San Francisco, and we were amazed at the natural beauty of the region. I was attracted by the opportunity to help shape the program as the sole cardiac surgeon and support a community that desperately needed help.

Q: You mentioned the need to revamp the program. Do you want to elaborate further on that? What have you been able to do?

A: Providence St. Joseph Hospital had unfortunately become a negative outlier among the 20 hospitals in the Providence system. From the get-go, I recognized that we had a sicker population than many realized, and that the best approach was to provide individualized care rather than a one-size-fits-all approach. At the same time, we had a team that was willing to make that happen, beginning with the office, in the operating room, and into the ICU and step-down areas.

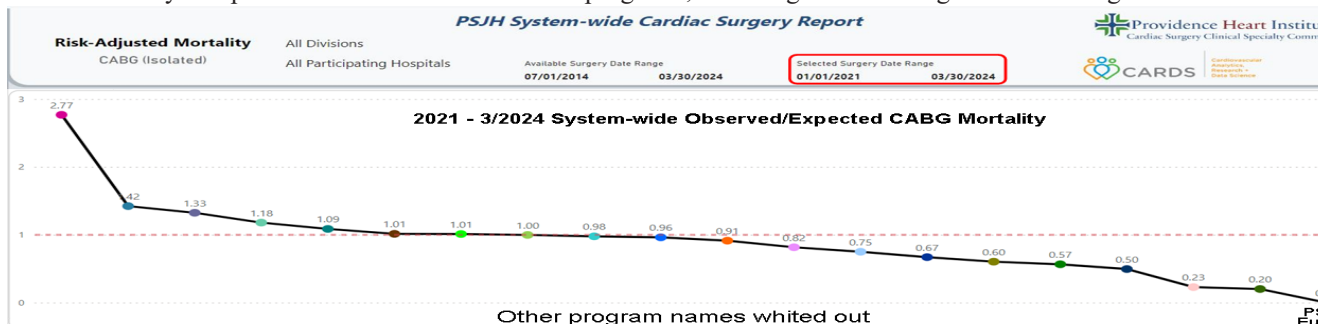
The turnaround since January 2021 was instantaneous, and we never looked back. I've brought some charts that outline our outcomes by the organization [Society of Thoracic Surgeons National Database] that measures the performance of all open heart programs throughout the country.

The first chart shows the risk of the patients that we have taken on.

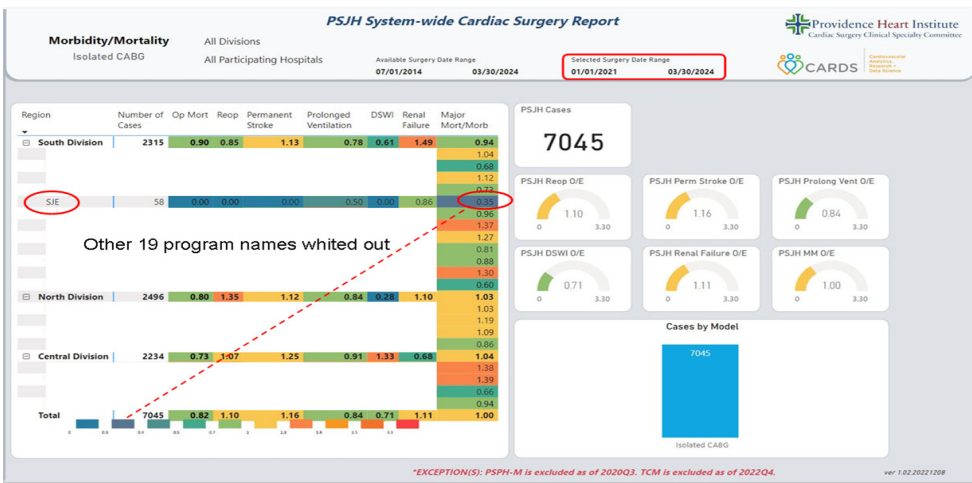


That risk has grown year by year, to the point that it is statistically much higher than the rest of the Providence open heart programs in California.

In spite of this higher risk, our mortality has been 0%, and this has been not only for coronary artery bypass grafting [commonly abbreviated as CABG], but for all of the cardiac surgery cases that the STS analyzes. This second chart shows our CABG mortality compared to the other 19 Providence programs, including those in Oregon and Washington.



Likewise, one might have expected that our higher risk would translate into a higher complication rate [aka morbidity]. In fact, our patients have experienced the lowest rates of major complications in the Providence system, as shown in this final chart.



One of our team just presented these outcomes at the California Chapter meeting of the American College of Cardiology. So, as I said, getting the word out that patients don't have to travel to the Bay Area for high quality surgery is my first order of business. But there are some other things that both physicians and patients are pleased to learn about our program.

Q: Such as? I mean to say, in the first place, I'm surprised that this hasn't been picked up by the press.

A: Well actually, Amanda, last year my office and I thought it would be nice to hold a Patient Appreciation luncheon. Many of our patients were a bit... sad, while at the same time grateful, when we no longer needed to actively follow them postoperatively in the office, and, for our part, we wanted to show appreciation for their trust in our care. So we hosted a catered event at the Wharfinger. The hospital sent out printed invitations, and so many patients and their guests showed up, that the hospital administration and the OR team had to stand. The Times-Standard wrote a very nice piece that included a picture of our outcomes, and there was a spot on local television that evening.

It is true, though, that our story has enlarged since then. We have been big advocates of using multiple arteries when we perform coronary bypass grafting (instead of one artery and several veins), well above the national average, since there has been emerging evidence that it increases long-term survival. We were chosen to present our work at an STS symposium, and we followed this up with an article in the leading cardiothoracic surgery journal, because this cutting-edge practice was unexpected at a remote, community hospital.

We received an additional honor last November. As part of contemporary, fast-tracking recovery, most open heart programs around the country look to remove the patient's breathing tube within 6 hours after the operation has been completed. However, because of our anesthesiologists' expertise, we adopted another cutting-edge practice in 2021, of removing the breathing tube right in the operating room. This was also well above the national average, and unanticipated for a remote program like ours. After we presented our work in this at a prominent meeting, we were invited by the same Society of Thoracic Surgeons National Database that measures the performance of all open heart programs throughout the country, to host a national webinar about our experience as part of their Quality Improvement Series. Previous webinars in the Series had been hosted by high-powered academic centers like Johns Hopkins and Northwestern. There were almost 400 other cardiac surgery programs from around the country listening in on the webinar, and it was truly a high point for our program. You can find it on YouTube [<https://www.youtube.com/watch?v=1qE8YdjMRkQ>].

Q: I can see what makes you tick. Any other closing thoughts?

A: Well, what makes me tick is my family. My wife, Janette, and I have felt very much at home here and actively participate in our parish. Like a number of families, we home-school our son, Justin, who is also on the Humboldt Swim Club. But I tell everyone about something I had never experienced before: that every week someone, whether its a patient or their family or a person at Safe-way, will thank me for being here. §

CMA Legislative Round up

AB 977: Governor Gavin Newsom signed Assembly Bill 977 authored by Assemblymember Freddie Rodriguez, a bill sponsored by the California Medical Association (CMA) to protect health care workers while at work in emergency departments.

“California has some of the strongest protections for health care workers, and now these workers will be provided equal protection while in the emergency room as they are provided outside a hospital,” said CMA President Tanya W. Spirtos, M.D. “Thank you Governor Newsom, Assemblymember Rodriguez, and the Legislature for having the backs of health care workers across the state.”

“Threats and violence against physicians and health care workers have increased in recent years,” said emergency physician Adam Dougherty, M.D. “AB 977 goes a long way toward ensuring the safety of employees and patients in emergency departments.”

Previously, assaults against health care workers inside an emergency department carried lesser penalties than assaults committed outside an emergency department. This bill will ensure that health care workers are not treated differently simply because they work in a hospital emergency department.

AB 977 was part of CMA’s priority bill package for the 2024 legislative session.

AB 2164: Governor Gavin Newsom signed Assembly Bill 2164 by Assemblymember Marc Berman, a California Medical Association (CMA) bill to reduce mental health stigma for physicians.

“Prioritizing mental health benefits not just physicians – who face high rates of burnout, depression, and suicide – but their patients as well,” said CMA President Tanya W. Spirtos, M.D. “CMA thanks Governor Newsom and Assemblymember Berman for ensuring physicians can access critical mental health services without fear of putting their careers at risk.”

“When our health care providers struggle with substance use disorder and other conditions, we want them to seek out help. During the Medical Board’s most recent sunset review, doctors and medical students shared with me that sometimes they feel that they cannot participate in counseling or recovery programs for fear that they will jeopardize their license, even if they are confident that they can still practice medicine safely,” said Assemblymember Marc Berman, Chair of the Assembly Business and Professions Committee. “AB 2164 ensures that physicians will not be punished for getting the assistance they need. Thank you to SEIU and CMA for their sponsorship of AB 2164, and thank you to Governor Newsom for signing the bill, which will help physicians stay mentally and emotionally healthy.”

“AB 2164 will be an important first step in changing our professional culture so that doctors can seek treatment of mental health conditions as they would for any other diagnosis,” said resident physician and member of the Committee of Interns and Residents/SEIU Karthik V. Sarma, M.D. “We thank Governor Newsom and Assemblymember Berman for ensuring that doctors won’t have to choose between their careers and seeking mental health care.”

Previously, the Medical Board of California’s licensure application for physicians and surgeons, including postgraduate training licensees, may have inadvertently discouraged physicians from seeking mental health services and perpetuated stigma around mental health.

In August, the Medical Board of California revised its licensure application to make clear to physicians that seeking care is encouraged. AB 2164 will further encourage physicians to seek mental health care by prohibiting the medical board and the Osteopathic Medical Board of California from asking invasive questions that stigmatize care on licensure applications.

AB 2164 was part of CMA’s priority bill package for the 2024 legislative session.

SB 1120: Governor Gavin Newsom signed Senator Josh Becker’s SB 1120, the “Physicians Make Decisions Act,” to ensure human oversight and patient safety are core components for the use of artificial intelligence (AI) in health care settings. SB 1120 was part of CMA’s priority bill package for the 2024 legislative session.

“As physicians, we recognize that AI can be an important tool for improving health care, but it should not replace physicians’ decision-making,” said CMA President Tanya W. Spirtos, M.D. “We applaud Senator Becker and Governor Newsom for ensuring that the use of AI in health care has necessary protections to prioritize the health and safety of our patients.”

“Artificial intelligence is an important and increasingly utilized tool in diagnosing and treating patients, but it should not be the final say on what kind of healthcare a patient receives,” said Sen. Becker. “An algorithm does not fully know and understand a patient’s medical history and needs and can lead to erroneous or biased decisions on medical treatment. The Physicians Make Decisions Act ensures that the human element will always determine quality medical treatments for patients.”

Recent news reports have highlighted instances and allegations of health plans using AI algorithms to wrongly deny medically necessary care. SB 1120 requires physician oversight of utilization review decisions made or assisted by a health plan’s AI decision making tools or algorithms. The bill strikes a commonsense balance that puts safeguards in place for automated decision tools without discouraging companies from using this new technology.

SB 963: Governor Gavin Newsom signed Senate Bill 963 by Sen. Angelique Ashby, a California Medical Association (CMA) priority bill that will protect victims of domestic violence and human trafficking.

“Emergency departments and frontline health care workers are uniquely positioned to identify victims of domestic violence and human trafficking,” said Tanya W. Spirtos, M.D., president of the California Medical Association. “Governor Newsom’s signing of SB 963 means that health care workers will be able to intervene and provide resources to victims in a safe, confidential, and timely manner.”

“Emergency department personnel have the highest likelihood of coming into contact with human trafficking victims,” said emergency physician Adam Dougherty, M.D. “This law will allow emergency room staff to connect victims of trafficking to services and break the cycle of abuse.”

SB 963 requires the implementation of human trafficking and domestic violence programs allowing self-identification in emergency departments. The bill would require the system to meet certain minimum requirements, including providing patient confidentiality, facilitating immediate interviews with medical personnel, and providing referrals to human trafficking and domestic violence services.

SB 963 was part of CMA’s priority bill package for the 2024 legislative session. §

HDNCMS Upcoming Events

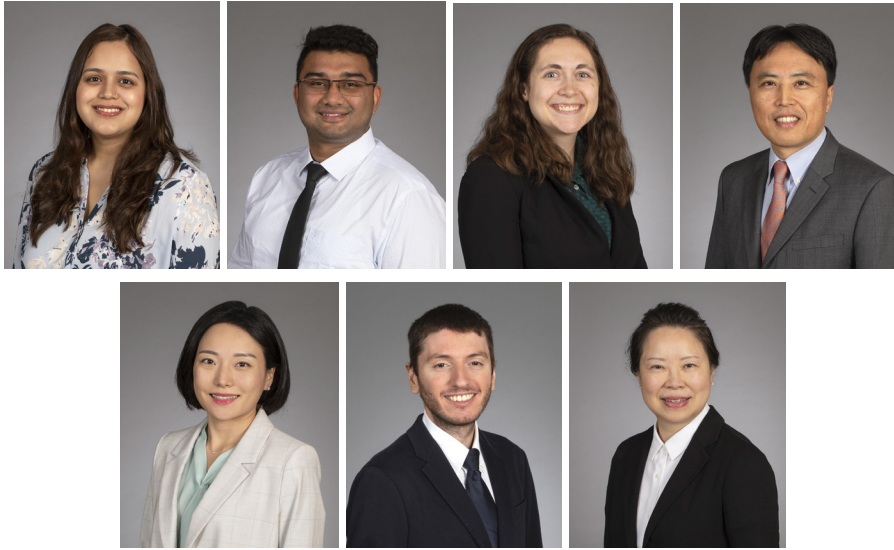
October:

10/16/24 - Executive Board Meeting 7:00PM
10/26/24-10/27/24 - House of Delegates, Sacramento

November:

11/16/24 - Annual Membership Gala @ The Ingomar Club

Year 1 Residents- Class of 2027



Arshia Akbar, M.D.

Shrawan Khadka, M.D.

Amanda Munkres McDonald, D.O.

Hyun Soo "Scott" Park, M.D.

Sojin Yang, M.D.

Yener Tuz, M.D.

In Sook "Grace" Kim, M.D.

Interested in helping to build our medical pipelines locally? Get involved with HUMPET and help inspire local students to pursue careers in medicine!

Click on the link below to take a short survey to let us know that you're interested in getting involved!

[HUMPET SURVEY](#)

HDNCMS Fall Family BBQ

September 8, 2024



Thank you so much to all who were able to join us for our Fall Family BBQ! We look forward to doing it again next year.



HDN Tattler

HAPPY BIRTHDAY WISHES IN OCTOBER TO:

DRS: Burns, Carlson, Dieker, Disiere, Feuerman, Gorham, Heston, Homan, Hooper, Irvine, Iverson, Jansson, Jones, Kennedy, Kilgore, Kurylo, Lau, Mangahas, McCracken, Mizoguchi, Myers, Perry, Ramayanam, Shrestha, Stokes, Wong.

-
- If you have any news you'd like to share with your colleagues: births, marriages, get well wishes, •
 - deaths, something you'd like to "brag" about or notify your colleagues of or thank them for, Please •
 - let us know so we can include it in the "HDN Tattler". •
-

Coming, Going & Moving Around

COMING/HERE:

Justin D. Arnold, MD	Dermatology	North Pacific Dermatology
Surinder Moonga, MD	Reg. Psych	PMG
Mauricio Bonacini, MD	GI	PMG
David Glenn, MD	Anesth	PMG
Hannah Knox, MD	Reg. Endo	PMG
Umair Ali, MD	Critical Care	PMG
Colleen Lennard, MD	ENT	PMG
Sanhita Reddy, MD	Anesth	PMG
Eric Robinson, MD	ER	PMG
Jason Yost	Hosp	PMG
Frank Skobel, MD	ER	PMG

GOING:

Benjamin Hunter, MD	ENT	PMG
Farshad Dana, MD	DERM	PMG
Jessica Babare, MD	Cardio	PMG
Eva Fried, MD	Hosp	RMH
Prabhat Shrestha, MD	Hosp	RMH

MOVING AROUND:

If you hear of someone coming, going or moving around please let the office know!

Health Awareness Calendar

October:

October 6-12 National Primary Care Week	October 5: World Meningitis Day
October 12-20 Bone and Joint Health Action Week	October 6: World Cerebral Palsy Day
October 13-19 International Infection Prevention Week	October 10: World Mental Health Day
October 20-26 National Healthcare Quality Week	October 13: Metastatic Breast Cancer Awareness Day
October 20-26 Respiratory Care Week	October 18: National Mammography Day
October 21-25 National Health Education Week	October 19: World Pediatric Bone and Joint Day
October 21-27 National Pharmacy Week	October 20: World Osteoporosis Day
October 23-31 Red Ribbon Week	October 26: National Prescription Drug Take Back Day
	October 29: World Psoriasis Day

Call For Award Nominations: ANNUAL MEMBERSHIP AWARDS

#1. OUTSTANDING CONTRIBUTION TO THE COMMUNITY

Presented to a physician whose work has benefitted the community

#2. OUTSTANDING CONTRIBUTION TO LOCAL MEDICINE

Presented to a physician who has improved local medical care

#3. OUTSTANDING CONTRIBUTION TO HDNCMS

Presented to a member who has served the medical society
beyond the call of duty

#4. OUTSTANDING CONTRIBUTION TO WORKFORCE DEVELOPMENT

Presented to a physician who has gone above and beyond in promoting workforce
development and pipelines into medicine

Awards will be presented at the Annual Membership Gala and recognized in the De-
cember newsletter.

**Please e-mail nominations to hdncms@gmail.com with name, award and
explanation for the nomination.**

NOMINATING COMMITTEE:

Join Luh, M.D.

John Mastroni, M.D.

Kelvin Vu, D.O.

George Zibilich, M.D.



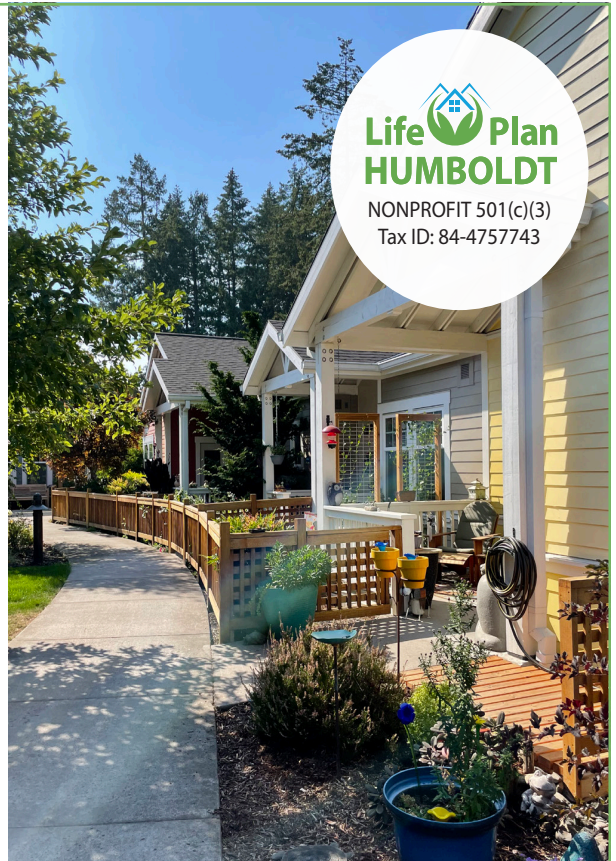
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Medical Society at
hdcms@gmail.com if you are interested in hosting in 2025.



HEALTH LAW LIBRARY

The California Medical Association's (CMA) health law library is the most comprehensive health law and medical practice resource for California physicians.

The library contains nearly 5,000 pages of up-to-date information on a variety of subjects of importance to practicing physicians. It includes content from the

California Physician's Legal Handbook, as well as more specialized information on peer review, payor contracting and other topics. **Access is free to CMA members - www.cmadoes.org**

MEDICAL PRACTICE: WORKFORCE ISSUES

- 6100 Employer Obligations Regarding Drug and Alcohol Use in the Workplace
- 6102 Physician Obligations When Conducting Drug or Alcohol Testing
- 6200 Employment Contract Model
- 6201 Employer Poster Requirements
- 6202 Ethical Guidelines for Employer and Employee Physicians
- 6203 Family and Medical Leave
- 6204 Independent Contractors
- 6205 Covering Physicians (Locum Tenens)
- 6206 New-Hire Reporting Requirement
- 6207 Pre-Employment Inquiries
- 6208 Retirement Notice
- 6209 Whistleblower Protections for Employees
- 6210 Overview of Select Physician Practice Employment Issues
- 6211 Wage and Hour Laws

MEDICAL RECORDS: HIPAA

- 4100 HIPAA Overview/Enforcement
- 4101 HIPAA Privacy Rule
- 4102 HIPAA Security Rule
- 4103 Business Associate Agreements
- 4104 HIPAA Electronic Transaction Rule
- 4105 National Provider Identification Numbers

Legal Information Line
 CMA Staff is ready to provide
 information about laws related to the practice of medicine. Call the Legal
 Information Line at (800) 786-4262



Get the facts on blood donor eligibility.

Many believe they are ineligible to donate blood when in reality they could be making a lifesaving difference today. A single donation can save multiple lives. Don't let myths deter you – get the facts about blood donor eligibility! Check with your local community blood center to learn more.



Myth: "I can't donate blood because I'm on medication."

Fact: Most medications do not disqualify you from donating.

Myth: "I have a tattoo, so I can't donate blood."

Fact: You can donate blood if your tattoo was done at a state-regulated tattoo shop. If your tattoo was done in a state that does not regulate tattoo facilities, then you must wait three months after it was applied to donate.

Myth: "LGBTQ individuals cannot donate blood."

Fact: With the FDA's updated guidelines, sexual orientation is no longer a factor in blood donation eligibility.

Myth: "I have a history of cancer so I can't donate blood."

Fact: In many cases, individuals with a history of cancer can donate blood if they have been cancer-free for a specified period and meet other eligibility guidelines.

Myth: "I am too old or young to donate blood."

Fact: There is no upper age limit for blood donation. The minimum age in most states is 16, with parental consent.

Myth: "Diabetics on insulin can't donate blood."

Fact: Diabetics on insulin can donate blood as long as their condition is well-managed.

Myth: "I traveled out of the country recently, so I can't donate blood."

Fact: Traveling does not automatically make you ineligible to donate blood. Guidelines vary, so be sure to check with your local community blood center to learn more.

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CMA WEBINARS SCHEDULED

<https://www.cmadoes.org/events>

LOG INTO MEMBERS-ONLY SECTION. Be sure to set up your CMA Web account if you have not already. There are many links to resources that are for “Members only”. If you need assistance with this, please reach out to the Medical Society.

[10/8/24 Virtual Grand Rounds: Caring for Youth at Risk for Suicide](#)

[10/22/24: HOD Engagement: New Delegate Orientation](#)

[10/25/24: OMSS Assembly and Education Conference](#)

[11/12/24: Virtual Grand Rounds: From Avian Flu to Covid 19](#)

CLICK ON THE LINKS ABOVE OR GO TO: <https://www.cmadoes.org/events> to register

ON DEMAND PRE-RECORDED WEBINARS

Browse CMA’s extensive library of pre-recorded webinars, covering a wide range of medical practice and public health topics. <https://www.cmadoes.org/webinars>

Calendar of Local Education, Physician Meetings & Socials

(This includes recordings of all past CME grand rounds)

http://www.hdncms.org/Physician_Educational_Calendar.html

PHYSICIAN SUPPORT COMMITTEE

(aka: Physician Well Being Committee)

CONFIDENTIAL ASSISTANCE

Physician-to-Physician

Dr. Soper: 498-4291 * Dr. Bayan: 834-8188 * Dr. Chavez: 502-5360

Dr. Douglass: 786-4028 * Dr. Frugoni: 845-0242 * Dr. Heidmann: 362-6704

Dr. Hunter: 498-0607 *Dr. Newdow: (916) 201-6078 * Dr. Talbot: (707) 464-8813

Confidential E-Mail: hdnpwbc@gmail.com

Or contact a physician through CMA’s Physician Confidential Line at 213-383-2691

[Link to Physician Support Committee Informational-Brochure](#)

ARE YOU A CONSORTIUM MEMBER?

Medical Society Members - \$150.00
Non-Medical Society Members - \$250.00

A self-supporting committee of the HDN Medical Society, our Consortium for Continuing Medical Education is accredited by the CMA Institute for Medical Quality to plan and accredit local programs to meet the needs of our physicians. Credit is provided for Grand Rounds, Tumor Board, Cardiac Cath Lab, UCSF Case Conference, Neo-Natal Resuscitation, etc. In addition to coordinating programs based on the feedback we get from the membership, we also work with the Humboldt IPA, Hospice, Public Health and other local agencies in coordinating CME credit for physicians.

HELP IDENTIFY LOCAL EDUCATIONAL NEEDS

HELP SUPPORT LOCAL EDUCATION - BE A CONSORTIUM MEMBER

NOTE: Consortium for CME is recognized as the “Education Committee” of the Hospital Medical Staffs.

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North Coast Physician



**CME CALENDAR
GRAND ROUNDS / CASE CONFERENCE CALENDAR
OCTOBER - NOVEMBER 2024**

OCTOBER

- 10/3 (Thurs) "PAIN AND SUBSTANCE USE".....ZOOM: 12-1PM
Speaker: Michael Weaver, MD, FASAM
- 10/17 (Thurs) "PITFALLS IN ANTICOAGULATION".....ZOOM: 12-1PM
Speaker: Ian Jenkins, MD, SFHM

NOVEMBER

- 11/7 (Thurs) "STEM CELL TALK".....ZOOM: 12-1PM
Speaker: Amy Sprowles, PhD
- 11/21 (Thurs) "A WOLF'S IN SHEEP'S CLOTHING: BENIGN COMPLAINTS HIDING SERIOUS ILLNESS"..ZOOM: 12-1PM
Speaker: Diane K. Birnbaumer, MD

TUMOR BOARD

Tumor Board meetings will be by virtual format via Microsoft Teams. To join "Teams" meeting, email Jennifer Hooven at Jennifer.Hooven@stjoe.org. Meetings beyond this time will continue to be re-assessed and either resume in-person participation or extend the virtual attendance via Teams. 12:00 - 1:00 p.m.

OCTOBER

- 10/2 (Wed) TUMOR BOARD PSJH
- 10/9 (Wed) TUMOR BOARD PSJH
- 10/16 (Wed) TUMOR BOARD PSJH
- 10/23 (Wed) TUMOR BOARD PSJH
- 10/30 (Wed) TUMOR BOARD.....PSJH

NOVEMBER

- 11/6 (Wed) TUMOR BOARD PSJH
- 11/13 (Wed) TUMOR BOARD PSJH
- 11/20 (Wed) TUMOR BOARD PSJH
- 11/27 (Wed) TUMOR BOARD PSJH

- The target audience are Physicians in Humboldt and Del Norte Counties. Advanced Practice Clinicians, RN's, RD'S, and
- Pharmacists are also invited to attend. Please contact Terri Rincon-Taylor, CME Coordinator at (707) 442-2353 or
- hdncme@gmail.com if you have any questions.

Please contact the office if you have not received a statement for your 2024 CME dues and would like to join or renew your CME membership for 2024. hdncme@gmail.com

YOU MUST BE MEMBER OF THE CONSORTIUM FOR CME TO CLAIM CREDIT

PLEASE HELP IN IDENTIFYING LOCAL EDUCATIONAL GAPS

**Suggestions for strengthening our local CME Program are always welcome -
We encourage you to get involved. Sign up to give a lecture.**



The Humboldt-Del Norte Consortium for Continuing Medical Education is accredited by the California Medical Association and ACCME to provide continuing medical education for physicians.

The Humboldt-Del Norte Consortium for Continuing Medical Education designates this live activity for a maximum of 1.0 hour of AMA PRA Category 1 CME Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

CLASSIFIED ADVERTISEMENTS & BULLETIN

CLASSIFIEDS:

Technical Director

The Northern California Community Blood Bank seeks a skilled leader and laboratory professional to join our team as Technical Director.

Located in the magnificent Northern California coastal redwoods, Eureka is the market and cultural center of a beautiful region filled with iconic redwoods and stunningly beautiful, rugged remote ocean landscapes. Our blood bank offers a low-stress environment, excellent work-life balance, and the opportunity to join a supportive, inclusive team and an organization with a vibrant community relationship.

This is a full-time, fully benefitted position. Benefits include health, dental, vision and life insurance, retirement plans, and a generous PTO and Sick Leave offering. Hiring and Relocation Bonus potential.

The Technical Director has overall responsibility for the Laboratory and all activities related to production of blood products. This position supervises Laboratory Staff performing component production, inventory control, distribution, and reference immunohematology, ensuring that all details of blood product manufacture are compliant with regulatory and standard-setting agencies.

A qualified candidate must meet CLIA General supervisor qualifications and hold a California Clinical Laboratory Scientist License (CLS). Experience as a technologist performing high complexity testing in a clinical laboratory and familiarity with standard laboratory methods and techniques is required.

For detail and to apply, visit www.nccbb.net/employment.html

Clinical Laboratory Scientist

The Northern California Community Blood Bank has an immediate opening for a Clinical Laboratory Scientist.

Located in the magnificent Northern California coastal redwoods, Eureka is the market and cultural center of a beautiful region filled with iconic redwoods and stunningly beautiful, rugged remote ocean landscapes. Our blood bank offers a low-stress environment, excellent work-life balance, and the opportunity to join a supportive, inclusive team and an organization with a vibrant community relationship.

This is a fully benefitted position with both part-time and full-time options.

Benefits include health, dental, vision and life insurance, retirement plans, and a generous PTO and Sick Leave offering. Hiring and Relocation Bonus potential.

The Clinical Laboratory Scientist is responsible for activities related to processing, testing, storage, transportation, and other handling of blood and blood products. The Clinical Laboratory Scientist performs reference immunohematological testing and participates in training, validation, implementation of new procedures, and compliance with regulatory and standard-setting agencies. This position requires on-call duties which is shared among the clinical licensed staff. The right candidate for this role is quality focused with fine attention to detail. This person will also enjoy a collaborative and busy environment with numerous opportunities for projects and quality improvement.

A qualified candidate must hold a California Clinical Laboratory Scientist License (CLS).

Members wishing to place a classified ad :

Please contact the medical society office at

hdcms@gmail.com.

Free to members for first 6 months

"We at NCP are always happy to receive photos of local scenery by our member physicians who would like to have their art displayed on the cover of the North Coast Physician. However, we have certain requirements before we print. At a minimum, please send you photos as a JPEG with minimal compression (level 8 or higher). Also please size the photo to 6 inches on the "short" side at a screen resolution of 125 dpi. If you're looking for total file size for email submission we would like something of at least 0.25 MB (250 KB) up to 2.5 MB. This gives the best screen resolution plus it provides adequate resolution for anyone who wishes to print out the cover. We will also accept TIFF or PSD files, although we prefer JPEG. If you need assistance, please let us know and the editor will be more than happy to work with you in obtaining the appropriate resolution."

Display Advertising Rate Schedule

<u>SIZE</u>	<u>MONTHLY</u>	<u>SIZE</u>
1/4 Page	\$140.00	8.00 (w) x 2.50 (h)
1/2 Page	\$160.00	8.00 (w) x 5.25 (h)
1/3 Page Vertical	\$150.00	3.00 (w) x 10.50 (h)
Full Page	\$200.00	8.50 (w) x 11.00 (h)
Full Page/Special Placement	\$275.00	8.50 (w) x 11.00 (h)
Business Card Ad	\$65.00	Copy Ready 3.50 (w) X 2.00 (h)
Classified Ads	\$5.25 per line	

DEADLINE: 15th day of the preceding month to be published