



GEORGIA OSTEOPATHIC
MEDICAL ASSOCIATION
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GOMA News & Updates

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Sonbol Shahid-Salles, DO, MPH is the New GOMA 2023-2024 President



Sonbol Shahid-Salles, DO, MPH is an emergency medicine physician at AdventHealth Redmond in Rome, GA. Dr. Shahid-Salles previously worked at Sacred Heart Hospital in Pensacola, Florida as the Assistant Medical Director, and at St. Mary's of

Michigan Medical Center. She completed her emergency medicine residency at the Michigan State University Genesys Regional Medical Center. Dr. Shahid-Salles attended the University of Georgia where she studied biology and Spanish before receiving her master's degree in public health from George Washington University.

Following graduate school, Dr. Shahid-Salles worked with program managers, medical officers, researchers, and Ministers of Health around the world while collaborating with the World Health Organization (WHO), the World Bank, and the U.S. National Institutes of Health under the stewardship of the Bill & Melinda Gates Foundation. An important element of her work was to inform broad health policy in developing countries. In 2010, Dr. Shahid-Salles graduated with her D.O. degree from the Kentucky College of Osteopathic Medicine (KYCOM).

Dr. Shahid-Salles began serving as the President of the Georgia Osteopathic Medical Association (GOMA) on November 15th. Additionally, she serves on the Osteopathic Political Action Committee (OPAC) Executive Board & the American Osteopathic Foundation (AOF) Board of Directors. Presently, Dr. Shahid-Salles continues her involvement within the AOA on the Bureau of Federal Health Programs & on the American College of Emergency Physician (ACEP) Public Health and Injury Prevention Committee working on important topics like gun violence and human trafficking.

Dr. Shahid-Salles serves her KYCOM medical school alumni community as the Past President of the Alumni Association working to support the practical needs of graduating students and young alumni. Locally, she is on the board of the Open Door Home, the Boys and Girls Club of Northwest Georgia and is very active within the Darlington School Tiger Pride community.

Renew Your Membership or Join GOMA Today!

Marla Golden, DO is New President of PCOM South Georgia



Beginning Jan. 2, 2024, Marla DePolo Golden, DO, MS, FACEP, will become dean of the osteopathic medicine program at PCOM South Georgia. A 1988 graduate of the Philadelphia College of Osteopathic Medicine in Philadelphia, she is currently associate dean of clinical education for both PCOM Georgia in Suwanee and PCOM South Georgia in Moultrie.

Dr. Golden began her administrative career at PCOM as a regional assistant dean for PCOM Georgia, creating a clinical anchor site for students in Jacksonville, FL, as well as overseeing other anchor sites in Northeast Florida. In addition, she developed relationships with partners in South Georgia. She went on to serve as interim and then chair of clinical education for PCOM South Georgia, while maintaining her position as regional assistant dean before moving into her current role.

At PCOM, Dr. Golden is also an associate professor of emergency medicine and recently served a term as a faculty representative to the PCOM Board of Trustees and chair of the Committee on Committees.

Dr. Golden was previously an associate clinical professor at the University of Florida Health Science Center, Shands Hospital. She served on the board of directors of The Brain Health Foundation, the Institute for Integrative Pain Management and the Florida Academy of Pain Medicine. She was the spokesperson for the Florida Academy of

Pain Medicine during the opioid crisis and worked on various committees of the American Board of Pain Medicine. Dr. Golden lectures nationally on the use of neuroplasticity techniques and OMT in the management of persistent pain. She is co-founder of the Neuroplastic Transformation Program and co-author of the Neuroplastic Transformation Workbook.

Dr. Golden's recognitions include the Felix Linetsky Award for Excellence in Education from the Florida Academy of Pain Medicine; the Outstanding Senior Emergency Department Resident Award from University Medical Center; and the William F. Daiber, DO Memorial Award from PCOM.

She holds a bachelor's degree from Cabrini College, a master's degree from Drexel University, and a doctor of osteopathic medicine degree from PCOM. Dr. Golden is a diplomate of the American Board of Emergency Medicine and a fellow of the American College of Emergency Physicians.

"Being selected as dean is an incredible honor," Dr. Golden said. "I'm honored to know that the PCOM community has the faith in me to lead this campus and to continue my work in Georgia, specifically in South Georgia, a region to which I've become very attached. There's a lot we can do in South Georgia because there is an incredible amount of talent in our institution at large, but specifically on the South Georgia campus. I think we will do great things for South Georgia and in South Georgia continuing the longstanding PCOM tradition of excellence."

Dr. Golden succeeds the previous dean, William Craver, DO, who retired on April 30, 2023. Robert Lloyd, DO, has served as interim dean from May 1 through Dec. 31, 2023.

[Read more about Dr. Golden's inspirations and goals for PCOM South Georgia here.](#)

**Ashley Huggett, DO Helps Us in
Understanding RSV**



Respiratory Syncytial Virus (RSV) infection causes seasonal epidemics of respiratory illness, leading to severe symptoms, lower respiratory tract disease, hospitalization and death in infants and older adults. It is the most common cause of hospitalization in infants with up to 80,000 hospitalizations and 300 deaths occurring annually in children under the age of five years. Older adults, especially those 75 years and older, who are frail, living in long term care facilities, or have medical conditions such as immunosuppression, diabetes mellitus and chronic lung, kidney and cardiovascular disease are at increased risk for RSV-associated hospitalizations. In older U.S. adults, up to 160,000 hospitalizations and 10,000 deaths due to RSV occur annually. Since the second year of the COVID-19 pandemic, RSV seasons have started and peaked earlier, but historically begin in October, peak in December and end in April. RSV epidemics are defined as when 3 % of RSV polymerase chain reaction test results are positive.

With a disease that mostly affects the extremes of age, infants and older adults, Ashley L. Huggett, DO, Assistant Professor of Infectious Diseases at Medical College of Georgia at Augusta University/Wellstar MCG seemed to be the perfect person to get more answers. Dr. Huggett graduated from West Virginia School of Osteopathic Medicine in 2016, and went on to do her internship in Internal Medicine and Pediatrics at Charleston Area Medical Center. After her residency, she did her infectious disease fellowship at Prisma Health in Columbia, SC, and now sees both inpatients and outpatients with HIV and general ID problems.

For most people, RSV symptoms will be mild. They don't happen all at once, but start to occur four to six days after someone is infected with the virus. Symptoms of RSV infection include: coughing (either productive or non-productive), sneezing, rhinorrhea or congested nose, fever, low or no appetite, wheezing, sore throat or headache. It generally takes one to two weeks for the average adult to recover from contracting RSV. Typically, RSV is diagnosed by RT-PCR for older children and adults. It is usually included on most institutional respiratory pathogens panel. For infants, an antigen test may be utilized. Warning of more severe RSV infections, Dr. Huggett said, "The extremes of age, infants and the elderly, in addition to immunocompromised (think solid organ transplant, HSCT, and hematological malignancies) can develop severe infection and require hospitalization."

Dr. Huggett clarified therapy when she said, "For the general pediatric and adult populations, antivirals are not indicated as supportive care is the mainstay of therapy. For some pediatric patients ribavirin in combination with IVIG may be used; conversely, in certain immunocompromised adult patients, ribavirin alone or in combination with IVIG may be utilized. Antivirals and IVIG are only used in the worst-case scenarios in those patients who require hospitalization; these medications will only be administered with multi-disciplinary teams including, but not limited to, infectious diseases (pediatric or adult), critical care/pulmonology, heme/onc, pharmacy (preferably with specialized ID training), etc."

In children, the Advisory Committee on Immunization Practices (ACIP) recommends a single dose of nirsevimab (Beyfortus), a long-acting monoclonal antibody for passive immunization to prevent RSV-associated lower respiratory tract disease in infants up to 8 months born during or entering their first RSV season, and in children 8 – 19 months of age who remain vulnerable to severe RSV disease through their second RSV season. The previous monoclonal antibody, palivizumab, has been limited by high cost and monthly dosing. Nirsevimab is not expected to interfere with the immune response to other routine childhood immunizations.

The ACIP recommends offering single-dose RSV vaccine for adults 60 years and older. Either of the RSV vaccines for adults can be used: RSVPreF3 (Arexy) an adjuvanted recombinant stabilized prefusion F protein vaccine, or RSVpreF (Abrysvo), a recombinant stabilized prefusion F vaccine. RSV vaccines can be given with other immunizations including influenza. Both vaccines offer a relative risk reduction of 75% or more in lower respiratory tract infections for two years after immunizations. RSV vaccines given to pregnant women between 24 and 36 weeks of gestation safely reduces the likelihood of severe RSV in their newborns. Local reactions and muscle pains were the most common side effects. Studies have shown low rate of adverse effects including atrial fibrillation and Guillain-Barre Syndrome that did not reach statistical significance. In regards to the vaccines, Dr. Huggett said, “While there are two RSV vaccines approved by the FDA, we currently do not know what their efficacy beyond two years is; therefore, as researchers learn more, it is possible that additional doses will be needed.”

We appreciate Dr. Huggett taking time away from her family, pets, yoga and gardening to answer our questions about RSV.

Board Updates Position on Telehealth Prescribing



The Georgia Composite Medical Board voted during its December 2023 meeting that effective Jan. 1, 2024, the Board's previous position on the flexibility allowed through the Drug Enforcement

Administration's telehealth prescribing policy during and after the COVID-19 pandemic will be rescinded.

All licensees should refer to the [Medical Practice Act and Board Rules](#) for proper prescribing practices in Georgia.

Medicaid & CON Issues Promise Fireworks in Upcoming Legislative Session



Two issues that promise to be on the legislative high priority list are re-evaluation of how to have low income Georgians qualify for Medicaid and the question whether Certificate of Need for hospitals has outlived its usefulness.

Many Republicans in the past have resisted any large-scale additions to the state's Medicaid rolls under the Affordable Care Act, but some are now looking at a program GOP-led Arkansas adopted to make 250,000 additional residents eligible for coverage. In return, they are seeking significant changes to the Georgia's certificate of need rules, which require medical providers to undergo a state approval process before they can build a new hospital or expand health care facilities.

Supporters say the rules prevent private practices from cherry-picking the most lucrative patients and leaving hospitals with money losers, such as rural emergency and primary care patients. Critics say the policy is outdated and helps powerful hospitals maintain their dominance. The certificate of need fight has consumed enormous amounts of energy and attention during recent legislative sessions.

This year, Lt. Gov. Burt Jones led a push in the Senate that would have struck down certificate of need requirements in rural parts of the state, allowing new hospitals and for-profit medical offices to be built in counties with fewer than 50,000 residents. That would have paved the way for construction of a medical center in Butts County, possibly on land owned by Jones' father. It didn't pass then but remains a priority for Jones and his Senate allies.

A Senate committee approved recommendations in early December that include a full repeal of the certificate of need rules. Full Medicaid expansion — and the billions of federal dollars that would subsidize it — could become a bargaining chip over the certificate of need. If Georgia opts for full expansion, it could follow the course Arkansas took, using those federal dollars to buy private insurance for residents who lack coverage. Arkansas state Sen. Missy Irvin met with a small group of Georgia Republicans to discuss how she helped lead the Medicaid expansion in her state. Georgia is one of 10 states that haven't fully expanded Medicaid eligibility. Then-Gov. Nathan Deal blocked a full expansion about a decade ago. Since then, Democrats and a handful of Republicans have pressed to expand the Medicaid program, but they've been blocked by GOP leaders who say a broader expansion would be too costly and inflexible in the long term.

A plan Gov. Brian Kemp pushed through extends Medicaid coverage to Georgians who meet work or certain activity requirements. But in the first three months since its launch July 1, just 1,343 uninsured adults enrolled out of about 370,000 that Kemp aides estimated would qualify.

Now, full Medicaid expansion appears to be gaining traction. State Senate Finance Committee Chairman Chuck Hufstetler, a GOP supporter of expansion, says he thinks it may be possible this time. "I see a win that's workable for everybody," he said, "combined with a Medicaid expansion."

GOMA's Legislative Day at the State Capital, with four other Primary Care Physician Coalition organizations, is Tuesday January

30. There will be a social event for GOMA members one mile away at SoCal Plaza in the fall afternoon after PCPC. [See additional information and register for GOMA's Day at the Capital here.](#)

U.S. House Passes Historic 7-Year Reauthorization of the THCGME Program

On December 11, the U.S. House of Representatives passed the Lower Costs, More Transparency Act (LCMTA - H.R. 5378), which reauthorizes the Teaching Health Center Graduate Medical Education (THCGME) Program for a historic 7 years. The long-standing broad support in Congress for the THCGME program reflects the ongoing advocacy engagement from the osteopathic profession, and the program's success in closing gaps in health care access in underserved communities. The THCGME program has trained thousands of medical and dental residents and is the only federal program training physicians in a community setting rather than a hospital setting.

Tell Georgia's U.S. Senators to reauthorize the THCGME program to give both medical residents and patients longer-term certainty in their ability to continue their training and have access to high quality care. H.R. 5378 passing the House is a great step in the legislative process, but we must continue the momentum by encouraging the Senate to act. Using our advocacy action center will make your voice heard.

The Osteopathic Advocacy Network makes it easy to advocate for your profession. [Check it out here.](#)

Gun Violence Prevention by Working Together



GOMA is one of five groups that belong to the Patient-Center Physicians Coalition of Georgia (PCPC). The pediatrician specialty group, Georgia Chapter of American Academy of Pediatrics, have been working on legislation to reduce injuries and deaths of children. As of 2020, gun violence has become the number one killer of America's children and teens. Kiesha Fraser Doh, MD, Chair of Ga-AAP Committee on Injury, Violence & Poison Prevention, is leading, along with other physicians, an effort to get physicians of various specialties to join a group, Georgia Physicians 4 Gun Safety. She answers some questions here:

Who we are: A group of healthcare professionals dedicated to gun violence prevention in Georgia. Non-partisan and not affiliated with any particular institution.

What we hope to achieve: Use patient narratives and existing evidence base to educate and persuade fellow Georgians and legislators to help reverse trends in gun violence in our state. Speak from the authority of our healthcare experience across the state.

What you can do: Get involved with gun violence education, speaking in medical and non-medical settings across the state, meeting with GA legislators, writing op-eds, canvassing, and more.

Involvement: Participants are asked to attend six meetings a year (every other month) and to serve on a committee to help us get things accomplished. (Options in the link below) We just started in September but already we've been featured speakers and have a daily presence at the Capitol. There will be something for everyone. The key is numbers - we need to have a critical mass of folks to make an impact and I think we are getting there.

[Mission Statement](#)

[Sign-up here](#)

Feel free to email questions to [Mike Greenwald](#) or [Sofia Chaudhary](#).

New Year's Resolution to Promote Osteopathic Profession



VOC offers discount to GOMA Members

There are several opportunities for Georgia's osteopathic community to collaborate with the AOA Department of



primary care topics.

Your GOMA membership can save you between \$70 and \$350 DO contributors for comment on research studies and clinical depending on how many CME credits you select from the 2024 Virtual articles – AOA partnership with Healio, Medical Economics, and Osteopathic Conference. This conference offers up to 48 CME credits of Medical News Today. DO contributors are needed to respond with of AOA Category 1-A Credit and AMA PRA Category 1 Credit™ in a 8-10 sentences on the requested topic. Requests are specialty flexible format. One will be able to attend live virtually February 16-18, focused and the response window is typically 48-72 hours. 2024, or attend on-demand anytime between February 18 and June 30,

2024. Please email [Ernst Lamothe](#), AOA Public Relations and Social

Media Director if you are interested in participating. Live conference attendees can chat and interact with faculty and other attendees while the presentations are playing. The VOC faculty will pre-record their lectures so they can answer questions in real-time throughout the entire presentation. In the on-demand format, attendees will see all comments made during the live presentation and will be able to email questions to content experts. This offers you the maximum flexibility in what CME you take and when you take it.

The schedule includes a diverse selection of subjects and features speakers from around the country including Erik Zarandy, DO, member of the faculty of PCOM Georgia, speaking on “Common Sports Related Injuries”.

What have attendees said about the VOC?

“Wonderful speakers, and it was great that lectures were available to view after the online live conference date!”

“All of the lectures were viewable at a later date. Also, the presenters being online when their presentation was playing for a Q&A was great.”

“Excellent, knowledgeable speakers and diverse, useful subjects.”

“Accessibility, affordability, relevance. It is easy to put together a good conference about interesting topics, but this conference did an especially good job of presenting cutting-edge info that is relevant to everyday practice.”

“Excellent and pertinent topics, extremely easy to access, overall 10/10.”

The end of this year is the end of the AOA's three year cycle, so [check out the schedule and register](#).

Gregory Harris, DO Joins Board of NBOME



The National Board of Osteopathic Medical Examiners (NBOME), an independent, nonprofit organization that provides competency assessments for osteopathic medical licensure and related health care professions, announced the addition of several new Board members and recognized outgoing members for their service at the NBOME Board Meeting and Retreat in December.

Gregory E. Harris, DO, is a hematologist/oncologist at the Harbin Clinic in Rome, GA. He has served the NBOME as a member of the Special Commission on Osteopathic Medical Licensure Assessment and the

Independent Review Committee. He spent several years working with the American Osteopathic Association (AOA), as a New Physician in Practice Board member and chair of the Bureau of Emerging Leaders. In that role, he represented osteopathic students, post-doctoral trainees, and new physicians in practice on the AOA Board of Trustees and attended the NBOME Liaison Committee. He is president-elect of the Georgia Osteopathic Medical Association and is also a member of the Florida and Michigan osteopathic medical associations; the American Society of Clinical Oncology; the American Society of Hematology; and the University of Pikeville Board of Trustees. He earned his osteopathic medical degree from University of Pikeville – Kentucky College of Osteopathic Medicine.

[Read about the rest of the new and outgoing members of the Board here.](#)

Harvey Apple, DO Will Be Missed by All



We are sorry to report that Harvey Apple, DO, passed away on December 15 at age 76 years old. Dr. Apple was a Past President of GOMA (1979) who continued to be involved with the organization. He was one of the doctors featured in the GOMA monthly newsletter in May 2022 in an article entitled "Osteopathic Physicians & their DOgs" which showed this picture of him with the following paragraph:

"Harvey Apple, DO was not feeling well due to recent fractures of vertebrae requiring surgery and 13 days in the hospital, but he wanted to share a photograph of him when he was upright along with his dog Hank. His wife Jan reports that Hank "is the best medicine." Dr. Apple is a 1973 graduate of PCOM in Philadelphia, and practiced family medicine in DeKalb County until 2005. Dr. Apple served as the director of the post-graduate program at Doctor's Hospital/Northlake Regional Medical Center 1987 to 1990."

First Generation Medical Students



PCOM Georgia & PCOM South Georgia are proud to support first-generation students. At the beginning of December, a panel of first-gen students, faculty and staff shared their experiences and offered advice during an enlightening luncheon event held at PCOM Georgia.

One topic of discussion was the importance of leveraging the resources available to the students. PCOM offers a variety of programs and resources to help first-generation students succeed. [Learn more here.](#)

Georgia Worst in USA for Healthcare

percentage of residents who chose not to see a doctor at some point in the past 12 months due to cost (15.50%).

In Other Words

- Third highest percentage of residents who lack health insurance coverage (12.63%).
- Fifth highest kidney disease mortality rate (18.87 deaths per 100,000 state residents).
- Eighth highest stroke mortality rate (44.27 deaths per 100,000 state residents).
- Eighth highest average deductible for residents with single health insurance coverage through an employer (\$2,269 annually).

"A problem is a chance for you to do your best."

-- Duke Ellington

[Read about the other states in this survey.](#)
