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INCLUDING

COMPUTER NEWSFOR PHYSICIANS

Desktop Publishing for Your Practice: How your computer can help you achieve freedom of the press. doctors' overhead costs. The change will result in higher fees for primarycare doctors and lower payments to such specialists as surgeons and radiologists.

The new system will be phased in over a five-year period, beginning in 1992. In late 1990 or early 1991, a model fee schedule detailing the changes in payment rates for various services will be published.

"Under the national fee schedule, there will be no more unfairness in Medicare payments to discourage doctors from seeing patients in rural America or inner cities," said Senator

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Junk bonds have been performing so poorly of late that their slide has been compared to the stock market crash of October 1987.

Over the past six months, defaults of low-rated bonds have increased, resulting in falling prices for individual bonds and a rise in share redemptions of junk-bond mutual funds. An illustration of just how severe this market downturn has been occurred in mid-September, following news of Campeau Corp.'s cash shortage. In one day of trading, three of the largest junk funds—Fidelity Investments' High Income Fund, T. Rowe Price's High Yield

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Brewer Foaming Over T-Shirt Takeoff By Tex. Doctors' Group, Files Lawsuit

When Dr. Alan Blum, a Houston family physician and founder of Doctors Ought to Care (D.O.C.), decided in September to protest a Miller Brewing Co. advertising campaign in Texas, he turned to the technique he knows best—satire.

Miller, however, was not amused.

On September 28, the giant brewery filed a lawsuit against D.O.C. and Dr. Blum. Miller contended that T-shirts sold by the 5,000-member health activist group mocking the company's

Miller Lite beer promotion, infringed on its "Lite" trademark.

D.O.C., best known for its cigarette ad parodies and adamant anti-tobacco stance, is defending its right to free speech, citing the First Amendment.

Sponsored Rock Concerts

The legal clash began when Miller announced through a series of ads that it would sponsor several Labor Day weekend rock concerts in six Texas cities. The beer company, which is owned by the mammoth tobacco manufacturer, Philip Morris Inc., said it would donate \$1 million of the money made over the weekend to the Texas Special Olympics.

Protesting the brewer's connection to a health charity, D.O.C. sold satirical T-shirts at one of the concerts, mod-

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more hostile to medical practices than others, such as rural areas where reimbursement is low and doctors are hard to recruit, some groups still seem to thrive while their neighbors down the block are faltering.

Most practices that start rolling downhill can be rescued, usually with the help of an independent consultant and often with the assistance of the local hospital. However, when the problems grow too large for the practice to handle, it may seek to be acquired by that hospital, or even by another group. In the most drastic case, it may find itself filing for bankruptcy, though fortunately this measure is the exception to the rule.

Anticipating Change

One major difference between successful and floundering practices, consultants say, is that the former take a "pro-active" stance in response to their professional environment, anticipating and adapting to change rather than denying it.

"Failure is often the result of simple neglect," says Dorothy Sweeney, a consultant with the Health Care Group in Plymouth Meeting, Pa. To keep a practice going, groups often have to lengthen hours, add satellite offices, cut costs and add services, perhaps by recruiting subspecialists. But there are still physicians who ignore the basic needs of both patients and personnel.

"I've had pediatricians, for example, who insist on keeping 9-to-5 office hours," says Ms. Sweeney. "I've even had doctors tell me, 'I have a very hardworking staff—I get 50 hours a week out of them and I don't even have to pay them overtime.' Physicians

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