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Emergency Preparedness Plan Crucial for Physicians and Patients

TO THE EDITOR: I would like to express my appreciation to the authors of "Disaster-Related Physical and Mental Health: A Role for the Family Physician,"¹ which appeared in the March 15, 2007, issue of *American Family Physician*. The authors provided an excellent discussion of this important and increasingly researched area of health. I fully agree with the authors' description of family physicians' suitability to address the physical and mental health needs of disaster victims. In addition, family physicians can help prevent many of these negative health outcomes by educating their patients and staff as a component of a disaster preparation plan.

It is essential that family physicians educate and prepare themselves for disasters; however, in the event of a disaster, it is still likely that practices will be overwhelmed with patients. Physicians should encourage individuals and families to prepare themselves by following recommendations such as those described in the Ready campaign (<http://www.ready.gov>) created by the U.S. Department of Homeland Security. Despite the availability of these and other resources, fewer than one half of Americans report having an emergency preparedness plan, and only 29 percent report having all or some of the major elements of a plan (including water, batteries, and necessary medications). Those who do have a plan are more likely than those who do not to be familiar with

the emergency/evacuation plan at their children's school (71 versus 28 percent, respectively) and feel more prepared for a terrorist attack (62 versus 24 percent, respectively).²

Personal and family preparedness will likely decrease the volume of patients presenting for medical care. Empowering individuals through personal preparation will also reduce the number of psychological casualties, which typically exceed the number of physical casualties to various degrees depending on the nature of the disaster.

In the event of a disaster, family physicians and their practices will be relied on to provide necessary services, support, and leadership. To accomplish these tasks, physicians and staff must be available, educated, and prepared.

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Case Report: Patient Adherence to Drug Regimens Vital to Treatment

TO THE EDITOR: A 57-year-old woman presented to the emergency department with worsening right leg pain over the previous two months. On the day of presentation, the patient was unable to bear any weight on her right leg. Her medical history was significant for hypertension, mental retardation, and a seizure disorder. Physical examination revealed right lower extremity warmth, tenderness to palpation, and 1+ nonpitting

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