



# THE CHRISTIAN PHYSICIAN & DENTAL RECRUITER

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## The Economy Plus Flexibility Keep Physicians in Practice

**Medical Groups Are Favorably Managing Turnover According to  
Cejka Search and AMGA Survey**

One silver lining to the current economic crisis is that physicians appear to be putting off retirement, for now. However, with the physician shortage intensifying and an eye toward the future, medical groups are sharpening their competitive edge in finding and keeping physicians through flexibility, incentives and retention initiatives.

These and other findings as reported in the 2008 Physician Retention Survey from the American Medical Group Association (AMGA) and Cejka Search, demonstrate that medical groups across America are getting better at anticipating their turnover rates and actively addressing the causes of turnover.

### Top findings include:

- Survey respondents reported a 6.1% turnover rate in 2008, compared to 6.7% from the 2006 Retention Survey
- Turnover was 5.9% among full-time male physicians and 6.6% among female physicians
- Fit and family were top reasons for turnover: 50% cited "poor cultural fit with the practice" and 32% indicated "relocation to be closer to family" as the most frequently mentioned reasons for leaving the practice voluntarily
- Nearly two-thirds (62%) believed physicians are delaying retirement due to the economy

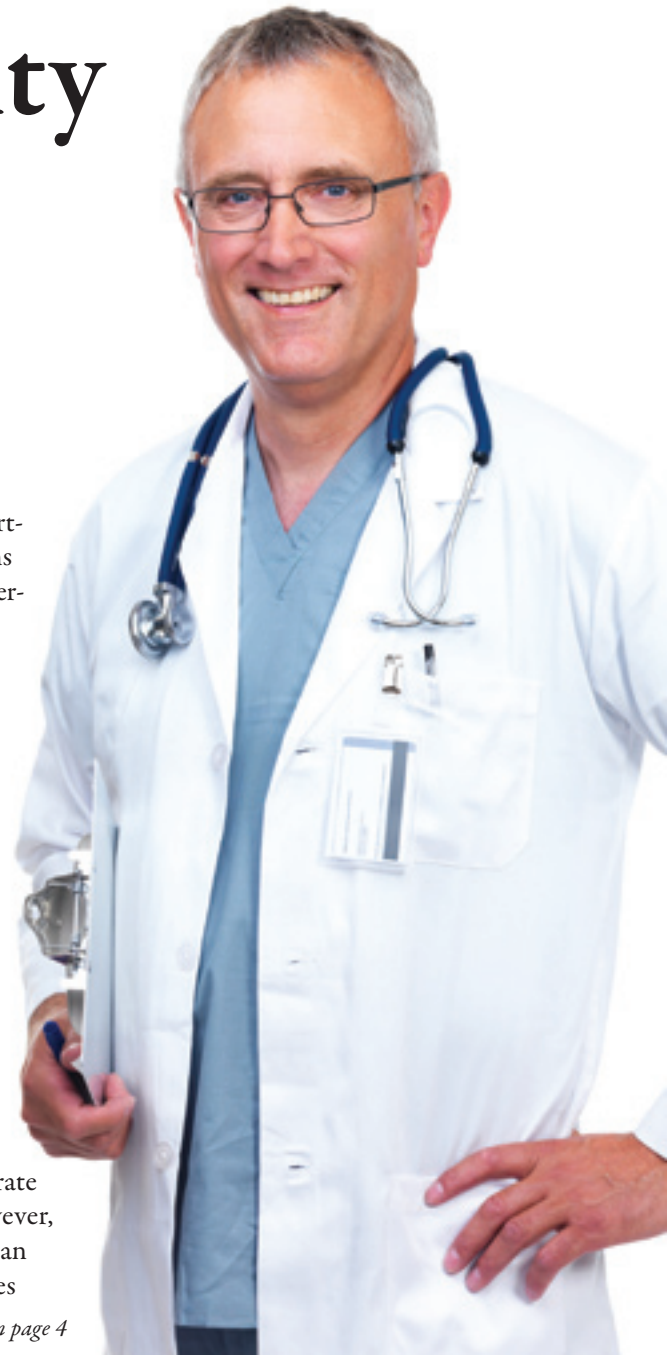
### Flexibility can keep physicians working

- Nearly half (48%) agreed that part-time options encourage physicians to stay while meeting family or personal needs, and 49% found that part-time options enable physicians to delay retirement
- Almost three-quarters (73%) of respondents offer pre-retirement physicians reduced hours, 56% allow for no call responsibility and 20% allow for specialization with certain patient groups

### Incentives aid physician retention in the critical, early years of practice

- Of those physicians leaving the practice, 46% of physicians separate within the first three years. However, incentives such as educational loan forgiveness and retention bonuses

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### BIOTECHNOLOGY BRIEF

## CMA physicians unveil new polls: Obama plan to scrap conscience rule panned by the public and a threat to patients

Washington, DC - The Christian Medical Association, the nation's largest association of faith-based physicians, recently warned that the Obama administration's plan to scrap a conscience-protecting healthcare regulation is very unpopular and threatens to cut off patient access to healthcare professionals and institutions nationwide, especially imperiling the poor and medically underserved populations.

Speaking at the National Press Club, CMA CEO Dr. David Stevens unveiled a new national poll, commissioned by CMA and conducted by The Polling Company, Inc., that shows that 87% of American adults surveyed said it is important to "make sure that healthcare professionals in America are not forced to participate in procedures and practices to which they have moral objections."

The national telephone survey of the public also showed that 63% support the existing conscience protection regulation and 62% oppose the Obama administration's proposal to get rid of it. Public comments on Obama's proposal end April 9.

A new online poll of faith-based healthcare professionals, also conducted by The Polling Company, Inc., found that 95% of physicians agreed, "I would rather stop practicing medicine altogether than be forced to violate my conscience."

Dr. Stevens said, "Rescinding these regulations is dangerous for patients. They

may soon find a sign hanging on the door of their doctor's office or hospital stating, 'Out of business--wouldn't do abortions.'" The public poll found that fully 88% of American adults surveyed said it is either "very" or "somewhat" important to them that they enjoy a similar set of morals as their doctors, nurses and other healthcare providers. Dr. Stevens noted, "Patients have a right to choose a healthcare professional who shares their moral views. No reasonable patient wants a doctor doing a procedure on them with which they are not only uncomfortable but morally opposed to."

"These regulations put teeth into the law and insure patients have the doctors and nurses they need. Removing them sends a clear message, 'It is open season on healthcare professionals of conscience. Discriminate at will!'"

CMA has organized Freedom2Care ([www.Freedom2Care.org](http://www.Freedom2Care.org)), a coalition of 35 organizations representing over five million constituents, to advance conscience protections. Individuals have used the Freedom2Care web site to send over 34,000 comments to the U.S. Department of Health and Human Services.

Visit [www.cmda.org](http://www.cmda.org) for more information.

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## Economy Drags Down Rural Recruiting

In Oregon, as in most states, the economy is affecting the recruiting of physicians. Soon however, falling physician numbers won't be the only concern.

The Obama stimulus package was designed, above all, to stimulate job growth. Money is to be poured into infrastructure projects. But a major component of the bill is aimed at creating a faster, more efficient healthcare system.

The plan to enhance broadband communication in all communities (specifically rural areas), and to transfer paper records to electronic files is long overdue. However, while this spells a more streamlined system for tracking patients and accelerating diagnosis, it also creates a vacuum of technical service positions.

In this economy, open jobs usually spell good news. However, in rural communities in Oregon, these new openings present more challenges to an already struggling recruiting endeavor.

According to Robert Duehmig, Communications Director for OHSU's Oregon Office of Rural Health, attracting top, recently graduated physicians to Oregon's rural communities is already a tough battle. "Students are facing a tremendous debt load" says Duehmig, and adding the necessity of IT recruitment stresses already strained health centers.

New physicians face an array of challenges when servicing a rural area. With smaller tax bases and less federal funding

*Faced with a multi-layered recruitment problem, clinics and health care centers are advocating for not only greater acknowledgment of rural communities' needs, but also a more refined focus on education--particularly early childhood education.*

*Continued on page 3*

## Letter to the Editor:

Dear Sir/Madam:

I received and read last evening your issue labeled Volume 12 Edition 2. It was headed by an article entitled "American Health Care Since 1994: The Unacceptable Status Quo." The piece, while replete with many noble-sounding bites, was basically socialist drivel. Do you really believe such stuff? If you do, I must say that from a biblical perspective, in my opinion, you are badly deceived.

It is certainly true and disturbing that our health care system is in a mess. But we are all fools if we turn to our federal government to "fix" it. Apart from military problems, what has our federal government ever really fixed? Do you really want health care from Veterans Administration-type system? I can tell you, from personal experience, this is the last thing I want. And yet we appear to be rushing precipitously toward nationalized health care. This is would be a very ignorant and dangerous "fix."

Why do you think American health care costs so much? One major reason is government meddling. What we really need is to get the government out of health care – completely, 100%. Then we need to encourage/force individual citizens to take responsibility for their own health care via a health savings account model. Thirdly, and perhaps most importantly, we need to detach bottom-feeding trial attorneys from our health care; this single act would lower health care costs dramatically.

But no power players desire such real solutions. So they keep feeding us lies and distortions and distractions, as exemplified by your article. And way too many of our citizens unthinkingly believe them.

Please remove me from your mailing list. I am no longer in clinical practice (thanks to our pathologic health care system) and so am not really in need of your publication. Moreover, it appears we are miles apart in our outlook on health matters, and I have no desire to read such articles are this issue provided.

Sincerely yours,

James L. Fletcher, Jr., MD



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## ALASKA

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BE/BC FP needed for faith based clinic. Housing, great benefits, CME, paid insurance and time off. Hunting, fishing and outdoor activities. Help maintain the overall wellness of population. Contact Janie Fillman at (907) 822-3203 or e-mail jfillman@crossroadmc.org.

## CALIFORNIA

**CALIFORNIA - SONORA**  
Invasive Cardiologist. Join a long established well respected Cardiology Group of three physicians. Practice is affiliated with Sonora Regional Medical Center, Adventist Health. Located in the beautiful foothills of the Sierra. Enjoy all forms of outdoor activities, while living in a family oriented community. Call 209-536-5016, or e-mail CV to Campbepa@ah.org.

## SOUTHERN CALIFORNIA

Loma Linda University Health Care in Southern California has immediate openings for BC/BE physicians who desire to continue the healing ministry of Jesus Christ in training the next generation of mission-centered physicians. Available opportunities: Dermatology, Emergency Medicine, Hospitalist, Occupational Medicine, Pediatric Clinical Geneticist, Pediatric Surgery and Urology. To submit your CV or view all current opportunities, visit us at [www.llu.edu/recruitmd](http://www.llu.edu/recruitmd) or call (800) 328-1163.

## ILLINOIS

### ILLINOIS OB/GYN

Female physician in Maryville, Illinois is seeking a caring, competent, Christian female physician to join her practice. New office space is to be completed in 2009. Practice will be busy from the start in this growing community. Salary and benefits are above national averages. For further information, fax CV to (618) 288-7418.

## INDIANA

### INDIANA - OB/GYN

Well respected, busy Christian group practice is looking for 1 BC/BE physician. Call is currently 1 in 4. One senior partner takes gyn only. This practice has a solid reputation and excellent work environment. No physician partner has left the practice since it was established in 1969 except for retirement. Lifestyle is excellent, and cost of living is low. Compensation package is competitive with 2 years to partnership. Several partners participate in missions and all physicians have a strong commitment to Christian values. Please contact Gail Schrock, Fairhaven Obstetrics & Gynecology, Inc. 1111 Lighthouse Lane, Goshen, IN. 46526. 574-533-0348, 1-866-778-9882. [gschrock@fairhavenobgyn.org](mailto:gschrock@fairhavenobgyn.org).

## INTERNATIONAL

### SERVICE IN PAKISTAN (SURGEONS, INTERNISTS, AND ANESTHETISTS);

The Christian Hospital in Sahiwal, Pakistan, is an evangelical service and outreach ministry of World Witness, the foreign missions agency of the Associate Reformed Presbyterian Church. This ministry reaches 20,000 Muslims per year and supports the Christian community as well. World Witness is seeking surgeons, internists, and anesthetists for several weeks to long-term. See: [www.christianhospitalsahiwal.com](http://www.christianhospitalsahiwal.com) and contact John Hopkins: [johnh@worldwitness.org](mailto:johnh@worldwitness.org) or 864/233.5226.

## IOWA

### FAMILY PRACTICE/NORTHEAST IOWA

Join a busy faith-based practice with a well-respected Christian group of six FPs. Generous salary guarantee with an added bonus structure. Living in a university town with excellent schools, a four season climate and a supportive group of colleagues who live their Christian values make this an outstanding opportunity. Contact Janice Yagla at 888-780-0390 or email CV to [Janice.Yagla@wfhc.org](mailto:Janice.Yagla@wfhc.org).

## NEBRASKA

### ORTHOPEDIC SURGEON

Practice of three orthopedists committed to providing orthopedic care with compassion as well as excellence. Time off for short term missions. Would like general and subspecialty orthopedist. On-site surgery center; local hospital within walking distance. Family-oriented city with many recreational and cultural activities. Less than 10 minute commute across the city. Low malpractice and cost of living. Vacation at the mountains and the beach; live here and enjoy all four seasons. Medical Director, Chris Wilkinson (308) 627-4664 or [cwilkinson@kearneyortho.com](mailto:cwilkinson@kearneyortho.com), Clinic Manager, Vicki Aten at (308) 865-2512 or [vaten@kearneyortho.com](mailto:vaten@kearneyortho.com).

## NEW HAMPSHIRE

### POSITION AVAILABLE; PEDIATRIC AND OR GENERAL DENTIST

Grace Family Dentistry is an independent, general and pediatric practice located in Concord, New Hampshire. Practice specializes in operative, cosmetic/esthetic, root canals, Endo, crowns/bridges, Implant restorative, removable, periodontics and oral surgery. Currently the practice has four dentists, five dental assistants and four dental hygienists. The practice is a state of the art ten operator office established 34 years old ago. The mountains and the ocean are only 90 minutes away as well as historic Boston. There is snow skiing locally, numerous water activities. Two commercial airports are within easy reach. Group strives to make their practice of dentistry an extension of their faith. Great opportunity with excellent compensation and benefits. If you are interested please call: (603) 225-6650 the office or e-mail [grace.family.dentistry@comcast.net](mailto:grace.family.dentistry@comcast.net) for further details and ask for Alex McCulloch, DDS or the office manager Margie Nickerson.

## OHIO

### NORTH CENTRAL OH - OB/GYN

Christian private practice group of three physicians is seeking a fourth associate to join their growing practice due to increased volume, plans to expand services and one provider plans to depart to move closer to family. Located one hour from Cleveland and Columbus in the family oriented, mid-size community of Mansfield, Ohio. Beautiful new office with 5,467 sq. ft, 3 patient exam rooms per physician, 3 LPN's, 1 NP and 10 clerical staff. In-office ultrasound technicians, Urodynamics, Bone DXA Scan and Novasure. Group call 1:3 weekdays and weekends. Unassigned call per month is 1:8. One day off per week. @45/deliveries/mo. Payor mix is 60% private insurance and 40% Medicaid. Full partner after two years. This group tries to run their practice through Biblical principles. Practice sees 50% adults and 50% is Obstetrics. MedCentral Health System offers a Level II Nursery and Pediatric Hospitalist Program. Salary plus benefits including health, medical liability, disability, life and dental insurances and a pension plan. 4 weeks of vacation/year. Membership dues paid and CME fund available. Relocation paid. MedCentral Health System is a non-profit two hospital system. MedCentral/Mansfield Hospital offers 326 staffed/registered beds. MedCentral/Shelby Hospital is a designated Critical Access Hospital. MedCentral offers > 200 active medical staff offering a wide range of services including Open Heart Surgery and Neurosurgery. Send cv to: Janice Evancho, Physician Recruiter, MedCentral Health Sys-

tem, 335 Glessner Ave. Mansfield, OH 44903. (419) 526-8152/Fax (419) 522-4697. Email: mdsearch@medcentral.org. Webiste: http://www.medcentral.org.

## OREGON

### ADVENTIST HEALTH/MEDICAL CENTER

Multiple opportunities for OBG, GI, ORS, IM, FP, Hospitalist physicians to join a Christian medical center in Portland Oregon. Adventist Medical Center and their medical staff, emphasize quality of medicine and quality of life. We strive to keep our providers happy and healthy by encouraging life balance. As a physician at Adventist Medical Center, you will experience an environment where compassion and caring are hallmarks of our health care ministry. We welcome your calls, emails inquiring into these practice opportunities. Interested candidates call or send your CV to: Michael L. Davis, 10000 SE Main St. Suite 200 Portland, OR 97216 or email to davisml@ah.org 503-251-6310. Fax 503-251-6286. Visit: www.adventisthealthnw.com or www.adventisthealthclinics.com.

### ADVENTIST HEALTH/MEDICAL GROUP - URGENT CARE

Physician for our 65 member physician group. We seek motivated, team oriented physicians with stellar clinical and interpersonal skills who wish to practice with other Christian physicians. Generous benefits including paid days off, health/ dental/vision/life insurance along with retirement plan, CME and etc. Interested candidates call or send your CV to: Michael L. Davis, 10000 SE Main St. Suite

200 Portland, OR 97216 or email to davisml@ah.org. 503-251-6310. Fax 503-251-6286 Visit: www.adventisthealthnw.com or www.adventisthealthclinics.com.

## PENNSYLVANIA

### CENTRAL PA COMMUNITY HEALTH CENTER - FP OR IM NEEDED

Located in the beautiful Appalachian Mts. of South Central PA with the scenic Raystown Lake area and Juniata River Valley in its catchment area, the Broad Top Area Medical Center (BTAMC) seeking a FP or IM to Join established CHC. This FQHC provides a full range of medical services to the poor and underserved citizens in this area. Must be committed to serving a rural population. Salaries to be negotiated via contract. Federal and State loan repayment options available. EOE Forward resume/CV to the BTAMC, 4133 Medical Center Drive, Box 127, Broad Top, PA 16621-0127. Phone 814-635-2916 x212. Email: WellNetGS@gmail.com.

### EMERGENCY MEDICINE

Full Time Staff opportunities are available at a community teaching hospital located in Wilkes-Barre, PA with an ED volume of 50,000. Excellent physician and mid-level coverage. Physicians must be BC in EM or PC with ED experience. Current ATLS, ACLS, PALS required. Interested candidates should contact Karen-Marie Johnson at 800-848-3721 x 4348 or email: johkar@teamhealth.com.

### FAMILY PRACTICE

FP (OB cert. preferred) FT position available now; Responsibilities include primary care with hospital rounding. We are an inner-city ministry with generous benefits and warm fellowship; Pittsburgh, PA; Call Heather (412) 345-0405, www.elfhcc.com.

## SOUTH CAROLINA

### FAMILY MEDICINE

BC FP's in rural S.C. seeking BC FP with or without OB with operative skills for C/S & PPBTL's to join practice with mission of quality compassionate care to the glory of God. Located 10 mi from a 50,000 acre lake in the piedmont of sunny S.C., 2 hours from beach and mountains. Quaint downtown area w/cultural opportunities, low cost of living. Please contact Oscar Lovelace, MD. W: 803-364-4852, H: 803-345-3559, F: 803-364-2014, E: olovelace@backroads.net.

## WASHINGTON

### FAMILY PRACTICE - WASHINGTON

3 Physician Christian FP group in beautiful, rural Ellensburg, WA looking for a 4th physician to join group. Less than 2 hrs from Seattle, <10 inches of rain per year, very nice climate, lots of year round outdoor activities, wonderful small town to raise a family. 25 bed hospital with weekend hospitalist coverage, OB optional, full spectrum FP practice, Preventative Medicine emphasis, low Medicare. Call Robert G. Johnson, M.D. at 509-962-6348 or email at bjohnson@fhcoe.com.

## Economy Drags Down Rural Recruiting... Continued from page 1

from Medicare, Oregon's rural community health centers and clinics often offer less in compensation than its urban neighbors.

Similarly, potential rural doctors must also consider the needs of their families. Limitations on entertainment and education in some rural communities often forces debt-saddled physicians into urban centers.

While the unemployment rate in Oregon is approaching double digits, rural communities already are faced with numbers as high as 12%. In effect, finding secondary employment for spouses and children of physicians can be difficult.

Physicians are not the only caregivers in need in rural areas.

Physicians assistants, radiology technology professionals, and nurses are all in short supply. Faced with a multi-layered recruitment problem, clinics and health care centers are advocating for not only greater acknowledgment of rural communities' needs, but also a

more refined focus on education--particularly early childhood education.

The key, according to Robert

Duehmig, is "getting kids interested in science at an early age."

Currently medical schools are graduating physicians at the same rate as they were 25 years ago. Without a resurgent interest in the medical field, they'll be a far more significant problem in health care than simply recruiting physicians.

Duehmig claims that in order to fully staff suffering communities, it's important to not look at issues on their own. The economy, education, and health care, as the President has pro-

posed, are inextricably linked. Electronic medical records affect speed and quality of care; greater matriculation levels in medical

schools begins to bring the ratio between patient and doctor more in line; and promoting local, community sustaining health care and medical training facilities leads to strong, vibrant rural towns.

As the nation faces a shrinking, more globalized world, it's often a novel concept for a top graduating physician to choose a career in small healthcare. Big, reputable residency programs are found in major city centers, like Portland. Often the only doctors to serve local communities were born from these very towns.

New physicians face an array of challenges when servicing a rural area. With smaller tax bases and less federal funding from Medicare, Oregon's rural community health centers and clinics often offer less in compensation that its urban neighbors.

The American Hospital Association is calling for more aggressive legislation to curb declining healthcare in rural centers. Currently, outdated technology, declining employment and diminishing federal funds are creating the perfect storm for aging, rural populations.

As the financial crisis deepens, vulnerable populations suffer the most. Even with the Economic Recovery Act, passed in February of this year, "viable careers sometimes cannot be made in rural centers," claims Duehmig. Sorting through the complex web of problems these populations are facing is a daunting task indeed. But, with a renewed focus by the new administration, healthcare professionals find hope, rather than despair, in local communities.

-Sam Holder, Staff Writer



# Economy Plus Flexibility Keep Physicians...

Continued from page 1

can reduce that to 33% and 29%, respectively

## Medical Groups are better at anticipating turnover...

- 67% of respondents found the rate of turnover in their practice was "close to expected" and 73% found their turnover rate was "acceptable," as compared with 2006 Retention Survey results where 58% said it was "acceptable"

## ...And actively addressing the causes of turnover

- Two-thirds (66%) of respondents conduct regular physician job satisfaction surveys and use the data to: monitor trend information (67%), create action plans (58%) and provide feedback for departmental use (52%)
- Almost as many (65%) assign a mentor to new physicians, and of these, nearly all (96%) were likely to continue
- Nearly half (48%) of respondents employ a defined retention program, and of these, 61% have a formalized program with written plans, goals and strategies

## Nurse practitioners and physician assistants (advanced practitioners) have a significant role

- The majority of primary care physicians (85%), surgical specialists (84%) and medical specialists (80%) are receptive to working with advanced practitioners
- When it comes to sharing call with physicians, 43% of respondents reported physician assistants share call and 33% cited nurse practitioners share call
- Nearly all (96%) respondents said their medical group will either maintain (50%) or increase (46%) the proportion of advanced practitioners to physicians in their organizations

The 2008 survey is available to non-survey-participating AMGA members for \$150 for the electronic version and \$175 for the printed edition. The non-member cost is \$300 and \$350, respectively.

For more information and to purchase a copy of the survey in print or electronic format, visit: [www.PhysicianRetentionSurvey.com](http://www.PhysicianRetentionSurvey.com).

## Methodology

The Cejka Search and AMGA 2008 Physician Retention Survey was distributed electronically via email to the entire 342 medical group membership of the AMGA from October to December 2008. All 50 survey responses were compiled, representing a 14.6% survey response rate. These responding groups collectively represent a population of 9,985 physicians.

*About American Medical Group Association (AMGA)*

*The AMGA represents medical groups and organized systems of care, including some of the nation's largest, most prestigious integrated healthcare delivery systems. More than 95,000 physicians practice in AMGA member organizations, providing healthcare services for approximately 95 million patients (more than one in four Americans). Headquartered in Alexandria, Virginia, AMGA is the strategic partner for these organizations, providing a comprehensive package of benefits, including political advocacy, educational and networking programs, publications, benchmarking data services, and financial and operations assistance.*

For more information, visit [www.amga.org](http://www.amga.org).

*About Cejka Search*

*Cejka Search, <http://www.cejkasearch.com>, is a nationally recognized executive and physician search organization providing services exclusively to the healthcare industry for more than 25 years. Partnering with organizations in pursuit of the nation's best healthcare talent, Cejka Search completes assignments across all levels of the healthcare continuum. Cejka Search is a Cross Country Healthcare, Inc. (Nasdaq: CCRN) company, a leading provider of healthcare staffing services in the United States.*

For more information visit <http://www.cejkasearch.com>, contact Melanie Berndts (Black Twig Communications), 314-255-2340, or Nancy Burns (Cejka Search), 314-236-4461.



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