Introduction

We are pleased to provide this 33rd edition of the American Medical Association Election Manual. It includes write-ups from announced candidates for election at the 2019 Annual Meeting, along with a description of our AMA election process and the current rules governing the conduct of campaigns.

In soliciting this information your speakers suggested that candidates list their sponsoring and endorsing societies, and include relevant biographical information and, if desired, a personal statement. Candidates and their sponsoring societies prepared the text and submitted the copy for publication, and responsibility for the content properly rests with the candidates.

AMA House of Delegates policy requires that each candidate’s conflict-of-interest information be available for review. You can find this information posted on our password-protected web page. As we migrate toward making greater use of our digital platform, we trust you will find the online version both user-friendly and robust, but suggestions for future editions are welcome; just send your comments to hod@ama-assn.org.

Elections are scheduled for Tuesday morning, June 11.

Sincerely,

Susan R. Bailey, MD
Speaker

Bruce A. Scott, MD
Vice speaker
1–5 AMA election process

President-elect (vote for one)
6       Susan Bailey, MD

Speaker (vote for one)
7       Bruce Scott, MD

Vice speaker (vote for one)
8       Lisa Bohman Egbert, MD
9       Corey Howard, MD

Board of Trustees (vote for two)
10    Robyn F. Chatman, MD, MPH
11    Michael Suk, MD, JD, MPH, MBA
12    Willie Underwood, MD, MSc, MPH

Board of Trustees, resident (vote for one)
13    Grayson W. Armstrong, MD, MPH

Council on Constitution and Bylaws (vote for one)
14    Thomas M. Anderson, MD
15    Mark N. Bair, MD, RPh

Council on Medical Education (vote for four)
16    Sherri Baker, MD
17    Kelly J. Caverzagie, MD
18    Henry L. Dorkin, MD
19    Sharon P. Douglas, MD
20    Shannon Kilgore, MD
21    John P. Williams, MD

Council on Medical Service (vote for two)
22    A. Patrice Burgess, MD
23    Thomas Madejski, MD

Council on Science and Public Health (vote for three)
24    Noel N. Deep, MD
25    Tamaan Osbourne-Roberts, MD
26    Bruce M. Smoller, MD
27    Corliss Varnum, MD

Council on Science and Public Health, resident (vote for one)
28    Laura Halpin, MD, PhD
Introduction

Officers and four councils are elected by the American Medical Association House of Delegates (HOD) at the Annual Meeting. Nominations for these offices are widely solicited throughout the Federation. Campaigns are often spirited and are conducted under rules established by the AMA-HOD, rules that may be modified from time to time. This democratic process allows delegates ample opportunity to become acquainted with the candidates and their views. The elections are by secret ballot and are conducted under the supervision of the Committee on Rules and Credentials and the chief teller, who are appointed by the speaker and vice speaker, who are responsible for overall administration of the elections.

Announcements of candidacy

Individuals intending to seek election at the next Annual Meeting should make their intentions known to the speakers, generally by providing the speakers’ office (hod@ama-assn.org) with an electronic announcement “card” that includes any or all of the following elements and no more: the candidate’s name, photograph, email address, URL, the office sought and a list of endorsing societies. The speakers will ensure that the information is posted on our AMA website in a timely fashion, generally on the morning of the last day of a House of Delegates meeting or upon adjournment of the meeting. Announcements that include additional information (e.g., a brief resume or a slogan) will not be posted to the website as they are in violation of the rules. Printed announcements may not be distributed in the venue where the House of Delegates meets. The speakers may use additional means to make delegates aware of members intending to seek election. (G-610.020[2])

Only a single announcement of candidacy is allowed, after which active campaigning is not permitted until the AMA Board of Trustees (BOT) nominates candidates for AMA councils (mid-April).

This rule provides a standard mechanism by which individuals can make known their intention to seek office. Printed announcements may not be distributed at an AMA-HOD meeting under any circumstance.

Nominations

The AMA-BOT solicits nominations for four elected councils: the Council on Constitution and Bylaws, the Council on Medical Education, the Council on Medical Service, and the Council on Science and Public Health. The deadline for receipt of nominations is March 15 of each year, and the AMA-BOT announces council nominees after its April meeting. Council candidates who have announced their intent to seek election, including those seeking re-election, must submit the necessary nomination materials to the AMA-BOT Office by the deadline.

Officers are nominated by their sponsoring societies; they are not nominated by the AMA-BOT. As a courtesy and to keep the headquarters informed, these candidates are asked to send a letter to the AMA’s executive vice president announcing their intention to seek office.

Under AMA bylaws, a delegate may also nominate candidates for council and officer vacancies from the floor.

Conflict-of-interest disclosures

Under AMA-HOD policy, all candidates for election are required to complete a conflict-of-interest/disclosure of affiliations form prior to their election. Candidates should contact the Office of General Counsel (ogc@ama-assn.org) or the Office of House of Delegates Affairs (hod@ama-assn.org) for information on completing the form. Forms must be submitted by March 15 of the year in which someone is seeking election. Completed forms are posted in the “Members-only” section of our AMA website. The requirement applies to all candidates for election, including those nominated from the floor. (G-610.020[15])
Campaigns

Announcements of candidacy are considered separate and distinct from active campaigning. Active campaigns for AMA elective office may not begin until the AMA-BOT has announced the nominees for council seats after its April meeting. Active campaigning includes mass outreach activities such as letters or emails directed to all or a significant portion of the members of the AMA-HOD, communicated by or on behalf of the candidate. (G-610.020[3])

At the Opening Session of the Annual Meeting, each officer candidate in a contested election will give a two-minute self-nominating speech. The order of the speeches will be determined by lot. No speeches for unopposed candidates will be given, except for president-elect. When there is no contest for president-elect, the candidate will ask a delegate to place his or her name in nomination, and the election will then be by acclamation. When there are two or more candidates for the office of president-elect, a two-minute nomination speech will be given by a delegate. In addition, the speaker will schedule a debate in front of the AMA-HOD to be conducted by rules established by the speaker. (G-610.020[12])

There are no nominating or seconding speeches for council candidates; the chair of the AMA-BOT places their names in nomination at the Opening Session of the AMA-HOD, after which the speaker will call for additional nominations from the floor.

Guiding principles for AMA-HOD elections

The following principles have been adopted by the AMA-HOD (Policy G-610.021) and provide guidance on how elections should be conducted and how the selection of AMA leaders should occur:

1. AMA delegates should: (a) avail themselves of all available background information about candidates for elected positions in the AMA; (b) determine which candidates are best qualified to help the AMA achieve its mission; and (c) make independent decisions about which candidates to vote for.

2. Any electioneering practices that distort the democratic processes of the AMA-HOD elections, such as vote trading for the purpose of supporting candidates, are unacceptable.

3. Candidates for elected positions should comply with the requirements and the spirit of the AMA-HOD policy on campaigning and campaign spending.

4. Candidates and their sponsoring organizations should exercise restraint in campaign spending. Federation organizations should establish clear and detailed guidelines on the appropriate level of resources that should be allocated to the political campaigns of their members for AMA leadership positions.

5. Incumbency should not assure the re-election of an individual to an AMA leadership position.

6. Service in any AMA leadership position should not assure ascendancy to another leadership position.

Campaign rules

This listing of campaign rules reflects policies adopted by the AMA-HOD and procedures developed by the speakers to comply with AMA-HOD actions. Where AMA-HOD policies are listed, the relevant AMA policy number is listed in parentheses following the policy. The rules are listed in general categories. Questions and concerns may be directed to the speakers at hod@ama-assn.org.
Expenses, events, parties and other activities

1. Campaign expenditures and activities should be limited to reasonable levels necessary for adequate candidate exposure to the delegates. (G-610.020[10])

_Campaign giveaways are covered separately; see ¶ 4 below._

2. Campaign parties are allowed only at the Annual Meeting. A state, specialty society, caucus or coalition may contribute to more than one party, but a candidate may be featured at only one party. Featured means: (a) being present in a receiving line, (b) appearing by name or in a picture on a poster or notice in or outside of the party venue, or (c) distributing stickers, buttons, etc., with the candidate's name on them. At these events, alcohol may be served only on a cash or no-host bar basis. (G-610.020[8])

_A candidate may be featured at only one party at the Annual Meeting irrespective of who sponsors the event. Any particular society may, however, contribute to more than one party or campaign event, so long as a candidate is featured at only one event._

3. Campaign gifts may be distributed at only the Annual Meeting in the not-for-official-business bag and at one campaign party. Campaign gifts should only be distributed during the Annual Meeting and not mailed to delegates and alternate delegates in advance of the meeting. No other campaign memorabilia shall be distributed at any time. (G-610.020[10])

4. The speaker shall establish a limit on allowable expenditures for campaign-related gifts. In addition to these giveaway gifts, campaign memorabilia are allowed but are limited to a button, pin or sticker. (G-610.020[10])

• The cost of stickers, pins or buttons will not be included in the spending limits. Stickers, pins and buttons should be simple and not be gifts in disguise.

• For the 2019 Annual Meeting, each candidate is limited to spending no more than two dollars and fifty cents ($2.50) per delegate and alternate delegate for giveaways, including drawings or door prizes for items to be delivered either at the meeting or later. This limit applies for the entire year and is specifically intended to include the total cost of those items distributed in the not-for-official-business bag at the Opening Session as well as any raffle or drawing conducted on behalf of a candidate. The aggregate limit for 2019 is $3,200 (640 x 2 x $2.50).

5. Candidates for AMA office should not attend meetings of the state medical societies unless officially invited and could accept reimbursement of travel expenses by the state society in accordance with the policies of the society. (G-610.020[13])

Literature and publicity

1. At the Interim Meeting, campaign-related expenditures and activities shall be discouraged. Large campaign receptions, luncheons, or other formal campaign activities and the distribution of campaign literature and gifts are prohibited at the Interim Meeting. It is permissible at the Interim Meeting for candidates seeking election at the next Annual Meeting to engage in individual outreach, such as small group meetings, including informal dinners, meant to familiarize others with a candidate's opinions and positions on issues. (G-610.020[6])

_This rule prohibits campaign parties as well as the distribution of campaign literature and gifts at the Interim Meeting. Announcements of candidacy (see above) may occur at the Interim Meeting._
2. Displays of campaign posters, signs and literature are prohibited in public areas of hotels in which Annual
Meetings are held because they detract from the dignity of the position being sought and are unsightly.
Campaign posters may be displayed at campaign parties, and campaign literature may be distributed in
the not-for-official-business bag for members of the AMA-HOD. (G-610.020[9])

3. An election manual containing information on all candidates for election shall continue to be developed
annually, with distribution limited to publication on our AMA website, typically on the web pages
associated with the meeting at which elections will occur. The election manual provides an equal
opportunity for each candidate to present the material he or she considers important to bring before
the members of the AMA-HOD. The election manual serves as a mechanism to reduce the number of
telephone calls, mailings and other messages members of the House of Delegates receive from or on
behalf of candidates. (G 610.020[4])

4. A reduction in the volume of telephone calls from candidates, and literature and letters by or on behalf of
candidates is encouraged. The use of electronic messages to contact electors should also be minimized,
and if used, must allow recipients to opt out of receiving future messages. (G-610.020[5])

5. No campaign literature shall be distributed and no mass outreach electronic messages shall be transmitted
after the Opening Session of the Annual Meeting. (G-610.020[9])

6. Upon request, the AMA Office of House of Delegates Affairs will furnish a candidate with a file (typically
a spreadsheet) containing the names and mailing addresses of members of the AMA-HOD, members
of AMA councils and the AMA-BOT, and (if requested) other groups such as state and specialty society
executives. The file may be used only for the mailing of a single announcement of candidacy or the mailing
of campaign-related material(s) after the AMA-BOT has announced council nominations (approximately
mid-April), at which point active campaigning is permitted. The Office of House of Delegates Affairs does
not provide email addresses for any purpose.

The file may not be used for mailing holiday cards, letters or other materials, even if not campaign-oriented;
or inviting members of the AMA-HOD to events, other than invitations to campaign receptions or parties that will take
place in conjunction with the Annual Meeting and that are mailed during the time allowed for active campaigning.
Such other use constitutes a violation of the rules.

Interviews and presentations
1. The speakers' office shall coordinate the scheduling of candidate interviews for general officer positions
(trustee, president-elect, speaker and vice speaker). (G-610.020[11])

Interviews are scheduled as follows:

- Interviews will be scheduled only for officer candidates in contested elections.
- Interviews will be scheduled from noon on Friday to 6 p.m. on Monday, the night before the
election. On these days interview sessions may be scheduled from 7 a.m. to 9 p.m., except for
times when the AMA-HOD or reference committees are in session.
- Interviews coordinated by the speakers' office will be scheduled for 10 minutes. Each candidate will
be given one open 10-minute period of time between each interview. Caucus staff should advise the
speakers' office of the time slot during which they wish for their interview session to be scheduled as
well as the location of the interviews. We will honor these requests as much as possible.
- The speakers' office will prepare and distribute the initial schedule of interviews. After the initial
schedule is released, adjustments or revisions must be arranged with the caucus staff and/or other
candidates affected.
• Groups wishing to arrange their own interviews are free to do so but must await release of the initial interview schedule. These interviews must be arranged with the candidates directly. The speakers’ office can provide candidate contact information for this purpose.

2. Interviews of council candidates are arranged by the candidates and the entities conducting the interviews. The speakers’ office can provide candidate contact information for this purpose.

3. Every state and specialty society delegation is encouraged to participate in a regional caucus for the purposes of candidate review activities. (G-610.020[14])

Elections

The AMA elections are held on Tuesday of the Annual Meeting from 7:30 to 8:45 a.m. under the supervision of the Committee on Rules and Credentials and the chief teller. All delegates eligible to vote must be in line to vote at the time appointed for the close of polls. Poll hours will not be extended beyond the times posted.

Only credentialed delegates are permitted to cast a ballot. If a delegate cannot participate in the election, he or she may have a designated alternate delegate properly credentialed at the AMA registration desk prior to voting.

Candidates are listed on the ballot in alphabetical order by name only. AMA bylaws require simultaneous elections that call for the exact number of votes for each vacancy. Each ballot clearly states the number of votes that should be cast. Ballots containing more or fewer votes will be declared invalid by the chief teller. If a delegate makes a mistake and spoils the ballot, he or she should immediately signal a teller and request another ballot. A majority vote of the legal ballots cast is required for election.

If all of the vacancies are not filled on the first ballot, a runoff ballot will be distributed and collected by the tellers on the floor of the AMA-HOD. AMA bylaws dictate that if three or more members of the AMA-BOT or any council are still to be elected, the number of nominees in the runoff election shall be no more than twice the number of remaining vacancies less one. If two or fewer members of the AMA-BOT or council are still to be elected, the number of nominees in the runoff shall be no more than twice the number of remaining vacancies. In either case, the nominees in runoff elections are determined by retaining those who received the greater number of votes on the preceding ballot and eliminating the nominee(s) who received the fewest votes on the preceding ballot, except where there is a tie. This process will continue until all the vacancies are filled.

Those candidates who are elected officially take office at the conclusion of the Annual Meeting.
President-elect (vote for one)

Susan Bailey, MD

The Texas Medical Association (TMA) and its delegation to the AMA enthusiastically endorse Susan Rudd Bailey, MD, for election as president-elect of the American Medical Association. She is also endorsed by the American College of Allergy, Asthma, and Immunology; the American Academy of Allergy, Asthma and Immunology; and the American Academy of Pediatrics.

Dr. Bailey is an honor graduate of Texas A&M University College of Medicine in its Charter Class. She was the first female Texas A&M graduate to become a regent for the Texas A&M University System and has been recognized as a Distinguished Alumnus of Texas A&M University as well as the College of Medicine. She completed her residency and fellowship training at the Mayo Graduate School of Medicine. She has been in the private practice of allergy and clinical immunology in Fort Worth since 1988. She is certified by the American Board of Pediatrics and the American Board of Allergy and Immunology, and is a distinguished fellow of the American College of Allergy, Asthma, and Immunology.

Prior to serving the AMA House of Delegates as speaker and vice speaker, she held many leadership positions at the AMA. Dr. Bailey served two terms on the AMA Council on Medical Education, culminating as chair of the council. She was a member of the AMA's Advisory Panel to the Women in Medicine Project and the AMA's Ad Hoc Committee on Women Physicians, the precursors to today's AMA Women Physicians Section. Dr. Bailey also has represented the AMA in the American Board of Medical Specialties Assembly, the board of directors of the Accreditation Council for Continuing Medical Education, and currently serves on the board of directors of COLA.

She currently serves on the AMA Board of Trustees Finance Committee, and served for two years as chair of the Membership Committee. She serves as an ex officio member of the AMA Council on Constitution and Bylaws and is a liaison to the AMA Academic Physicians Section Governing Council.

Dr. Bailey is an experienced leader of organized medicine's policymaking bodies, having served as vice speaker and speaker of the 500-member-plus TMA House of Delegates as well as for the American College of Allergy, Asthma, and Immunology House of Delegates. She is a past president of the TMA and the Tarrant County Medical Society. As TMA president, she led the effort to stave off substantial cuts in Medicaid physician fees, to pass first-in-the-nation protections for employed physicians' clinical autonomy, to require vaccination of college students against meningitis, and to reform the Texas Medical Board's disciplinary processes. She has always been a champion for private practice in all of her leadership roles.

Over the past eight years, Dr. Bailey has demonstrated an efficient presiding style and the ability to skillfully guide the AMA House of Delegates in its debate on often-contentious issues. Her boundless energy, expansive knowledge, and proven leadership qualify her for election as president-elect of the American Medical Association.

Personal statement:
“I know that the patient-physician relationship is sacred because I have had the distinct privilege and honor of becoming part of so many patients’ lives as a healer and a teacher. We must protect that relationship. I vow to continue this honor in my role as president-elect of our great AMA for the patients of our nation. I will expand my work to improve communication within the AMA and to blend the views of all physicians across the country into one strong, unified, and effective voice for our profession and the patients we serve.”
Speaker (vote for one)

Bruce Scott, MD

Over these last four years Dr. Bruce Scott has distinguished himself as our vice speaker, and the Kentucky Medical Association and the Kentucky delegation to the AMA are proud to nominate him for speaker of our AMA House of Delegates. Dr. Scott’s nomination is enthusiastically endorsed by the Southeastern delegation to the AMA and the Otolaryngology Section Council.

Dr. Scott strongly believes that the role of the speaker is to protect the right of the minority to be heard while ensuring that the will of the majority is clear. As a leader who genuinely cares about listening to all sides, he applies parliamentary procedure to encourage fair debate. His understanding of the formal rules, coupled with an occasional dash of humor, allows him to maintain order, moving the meeting forward while gently guiding those who need assistance. Meetings with Bruce at the podium run smoothly and efficiently.

Once the House adjourns, Dr. Scott takes seriously his continuing responsibility to advocate for the policies adopted by our House of Delegates and has proven to be an effective member of the AMA Board of Trustees. He has served on the Board's Awards and Nominations Committee and Audit Committee for four years. During his tenure he has been a liaison to the AMA Young Physicians Section, the AMA Organized Medical Staff Section and currently the AMA Medical Student Section. As vice speaker he has been a member of the AMA Council on Constitution and Bylaws. In all his roles, Bruce has remained a stalwart champion for the policies of our House.

Prior to his election as vice speaker, Bruce served our AMA as chair of the AMA-RFS, delegate of the AMA-YPS to the AMA-HOD, young physician member of the AMA Board of Trustees and delegate from Kentucky to the AMA-HOD. Over the course of his career Dr. Scott has been chair of his hospital department of surgery, governor of his state specialty society, president of his county medical society, speaker of his state medical association and currently serves as president of the Kentucky Medical Association.

A graduate of Vanderbilt University, he completed medical school and residency at the University of Texas Medical Branch, before returning to his home town of Louisville to practice otolaryngology.

Dr. Scott understands the issues facing our profession because he lives them every day. Bruce is an actively practicing physician in a five-physician independent private practice, the medical director of a multispecialty ambulatory surgery center and a clinical assistant professor at the University of Louisville School of Medicine.

If Bruce looks a little “shell shocked” at A-19, it will not be from parliamentary fatigue but rather because his only daughter is getting married just one week before the opening of the AMA-HOD.

Personal statement:
“Thank you for the honor to have served as your vice speaker these last 4 years. I seize every opportunity to share my great respect for the representative democracy of our HOD – truly the House of Medicine. It is a tremendous privilege to help craft policies in the best interest of our patients and our profession. My passion for our AMA remains strong, and I humbly ask for your support to become your speaker.”
Lisa Bohman Egbert, MD

The Ohio State Medical Association and the Great Lakes States Coalition are proud to nominate Lisa Egbert, MD, for vice speaker of the American Medical Association. Lisa is endorsed by the American College of Obstetricians and Gynecologists, the American Society of Anesthesiologists and the AMA Young Physicians Section.

After earning her Bachelor of Science degree from The Ohio State University, Lisa graduated from OSU’s College of Medicine. She is a general ob/gyn and a fellow of the American College of Obstetricians and Gynecologists. Lisa has been in solo private practice in Dayton, Ohio, for 22 years.

Lisa is the proud mom of three college-age children—her twins, graduating in May 2019, and the youngest, a freshman. All three have followed in their parents’ footsteps at The Ohio State University. Her husband of 30 years is an anesthesiologist in private practice.

Personal statement:
“As a ‘parliamentary nerd,’ I am as intrigued by the process of our AMA meetings as I am invested in its product. This intrigue began in my first year of medical school. I was hooked when I attended my first annual meeting and witnessed the impressive achievement of discussing, refining and ratifying the diverse policy that is the backbone of our AMA. Since that meeting, I have been honored to serve our AMA in many capacities, each preparing me to fulfill my dream of being Vice Speaker.

“My first experience was writing testimony for the Medical Student Section—by hand, in those days! Later, I was elected Alternate Delegate to the HOD from the Resident Physicians Section. While serving as Vice Chair and Chair of the Young Physicians Section, I performed the role of speaker. I helped lead the section’s transition from an independent policy compendium to the combination of new policy creation and HOD review that is in practice today and now in many other sections as well.

“I served on the AMPAC Board of Directors, which provided insight into our legislative advocacy activities. My experience within the HOD included serving on the Rules Committee, being a Teller, and serving on and chairing Reference Committee F. I am currently privileged to be in my second term on the Council on Medical Service.

“I have been active at the local and state levels as well, including serving as Montgomery County Medical Association President and on the Ohio State Medical Association Governing Council. I am currently the Parliamentarian for the OSMA, with duties that include sitting on the Bylaws Review Committee and serving as the vice speaker for the OSMA House of Delegates. I am an experienced parliamentarian and a member of the National Association of Parliamentarians and the American Institute of Parliamentarians.

“Our HOD is the melting pot of medicine. Its policies are rigorously honed on the floor—in many cases down to individual words—and these extensively vetted policies must be followed to the letter. Your Speakers have serious responsibilities: they not only expedite the process of our policy development through parliamentary procedure, they also represent our HOD and its policies to the BOT. I am excited to embrace these responsibilities as the Vice Speaker of our AMA, and I ask for your vote.”
Corey Howard, MD

The Florida Medical Association (FMA), the American College of Physicians (ACP), the American Association of Neurological Surgeons and the Southeastern delegation to the AMA proudly endorse Corey Howard, MD, FACP, for vice speaker of our AMA.

Experienced speaker
Corey believes that there are many sides to an issue, and all deserve open, honest and fair debate. He has the ability to bring those with different opinions together to facilitate understanding that leads to consensus. This art he learned through six years of service as vice speaker and speaker of the FMA House of Delegates. A House that seats 487 delegates.

Leadership
Corey currently serves as president of the FMA, chair of the FMA Board of Governors and chair of the Florida delegation to the AMA, an elected position he has held for the past eight years. He has also served as president of Collier County Medical Society and chair of Naples Community Hospital’s Department of Internal Medicine. In 2000, he was selected by the AMA Glaxo Foundation as one of the “50 Top Emerging Leaders.” In 2018, Corey was awarded the Florida Chapter of the ACP’s Outstanding Service Award, its highest honor that has been given only three times in the state’s history.

AMA service
Corey’s dedication to the AMA began in 1992. He served as delegate to the AMA Resident Physician Section for the American Society of Internal Medicine (ASIM) prior to its merger with ACP and chair of the ASIM’s Resident Physician Section. He subsequently served as delegate to the AMA-RFS, AMA Young Physicians Section and AMA House of Delegates for the FMA. Throughout that time, Corey has authored, co-authored or collaborated with AMA colleagues on dozens of resolutions, many of which are AMA policies today.

Demonstrated advocate for medical students, residents and young physicians
Corey knows that medical student, resident and young physician leaders represent our present and our future. He has ensured that they have a powerful voice in the FMA by creating a slotted seat for them on FMA councils, committees and the board. He also serves as a mentor on the art of resolution writing through interactive seminars he created and presents at local, state and national symposia.

Legislative experience
In addition to his busy practice as a board-certified internist, Corey regularly attends the AMA National Advocacy Conference and lobbies at the state capitol in Florida and in Washington, D.C., to advocate for legislative and regulatory policies physicians need to best serve their patients. He is especially proud of his collaboration with local leaders throughout the Sunshine State to develop programs that support the health and well-being of practicing physicians in an increasingly complex practice environment.

Personal statement:
“My goal as Vice Speaker is to create a culture in which everyone is empowered to speak their mind while ensuring that the minority voice is always heard. I will make sure the policy making process is productive and efficient. As a member of our AMA Board, I will protect the voice of our HOD and ensure that our policies are vigorously represented. Our House demands Speakers committed to being unbiased stewards of the democratic process; I pledge to be that kind of Speaker.”
Robyn F. Chatman, MD, MPH

The Great Lakes States Coalition, the Ohio State Medical Association and its AMA delegation are proud to nominate Robyn F. Chatman, MD, MPH, FAAFP, CPE, CPHIMS, CHEP, for election to the AMA Board of Trustees. Dr. Chatman is also enthusiastically endorsed by the American Academy of Family Physicians, the Ohio Academy of Family Physicians, the Academy of Medicine of Cincinnati and the Cincinnati Medical Association.

As the president of her state medical society, Dr. Chatman began the process of re-establishing the Young Physician Section in Ohio. She also participated in efforts to enhance cooperation between the Ohio State Osteopathic Association and the State Association of Medical Directors of Health Commissioners.

Armed with skills in clinical informatics and family medicine, Dr. Chatman was recruited by Accenture to identify time-saving elements in the workflow of physicians of all specialties and develop processes to decrease the computer and paper burden.

Her skills in developing an integrated health system caught the attention of a private practice addiction psychiatrist who wanted to add primary care services to treatments he provided to his patients in substance use recovery. Dr. Chatman led the integration team, converted the paper psychiatry charts to the new EHR used by both sides of the practice while bringing up a suburban satellite location, essentially doubling the number of patients who would have access to medication-assisted treatment (MAT) for substance abuse.

A native of the Mississippi Gulf Coast and a survivor of category 5 Hurricane Camille, Dr. Chatman noticed a large disparity of the distribution of supplies and medical care. Knowing that there had to be more equitable ways to deliver care during disasters, she was introduced to Disaster Medical Assistance Teams (DMATs), a division of the Department of Health and Human Services. Dr. Chatman is the interim chief medical officer of DMAT OH-5 and is a veteran of multiple deployments.

The unique skillset that Dr. Chatman brings to our Board includes:
- Expertise as a clinical informatics consultant
- Business management acumen necessary to run a thriving private practice
- Adeptness narrowing gaps caused by social determinants of health
- Twenty-three years of interprofessional clinical practice in primary care

Personal statement:
“The AMA has given physicians a voice. I have experienced the daily struggle many physicians endure just to keep their doors open including ‘fail first’ prior authorizations and electronic health records that are inefficient, taking time away from patients. Our AMA has developed tools, such as Xcertia, in collaboration with other organizations to address these challenges. Catalyzing the evolution of augmented intelligence for our House would be a goal of mine.

“Organized medicine has been a successful part of my personal physician burnout prevention plan. The opportunity to serve the House of Medicine—by crafting meaningful policy as Chair of the Council on Science and Public Health to advance the practice medicine—has been exceptionally rewarding. Much of my growth as a physician leader is a direct result of my activities within the AMA. Your vote will allow me to provide a return on your investment.”
Michael Suk, MD, JD, MPH, MBA

Hello. My name is Michael Suk, and I’d like to be your voice on the AMA Board of Trustees.

Many of you know me already. I’ve been part of this organization for almost 30 years. I was the first medical student directly elected to the AMA Board of Trustees. That experience gave me firsthand knowledge of, and appreciation for, how the AMA brings young people in and nurtures their careers.

Invigorating the next generation of leaders is a key goal of mine—as is expanding the physician voice in advocacy and defending all practice pathways in the delivery of value-based care.

Value-based care is my passion. As chief physician officer, Geisinger System Services, and chairman of Geisinger’s Musculoskeletal Institute and Department of Orthopaedic Surgery, I’ve formulated and directed value-based improvements and growth strategies for one of the largest integrated health care delivery systems in the nation.

In 2018, I created the world’s first and only total hip lifetime warranty. Covering all expected and unexpected follow-up costs on patients’ hip replacements for the rest of their lives was only possible because my team and I had already developed the highly reliable, evidence-based processes we knew would support this groundbreaking warranty.

I firmly believe people are what makes quality health care possible. As a practicing academic orthopaedic trauma surgeon overseeing 20 residents and six fellows, I am well aware of the demands the medical profession places on each of us. I’ve become an expert in addressing the environmental burdens that contribute to physician burnout, and I created the original policy to govern resident work hour reform. As a member of the AMA Board of Trustees I will continue to advocate for medical professionals in all stages of their careers.

I am board certified in orthopaedic surgery and fellowship trained in orthopaedic trauma surgery. I am also a professor of orthopaedic surgery at the Geisinger Commonwealth School of Medicine. I’ve authored two books and over 100 individual chapters and articles, and I have six patents filed and pending.

Michael Suk, MD, JD, MPH, MBA, FACS—that’s me. People ask why so many degrees? I tell them the answer is simple: they help me be a better physician. My hard work and dedication have been recognized on numerous occasions:

- White House fellow under George W. Bush in America’s most prestigious program for leadership and public service
- Special assistant to Secretary Gale A. Norton of the U.S. Department of the Interior where I was one of the country’s earliest and leading proponents of the health benefits of nature
- Baldridge executive fellow in the nation’s leading program for organizational performance excellence
- Member of the AMPAC Board of Directors
- AMA delegate and past chair for the American Academy of Orthopaedic Surgeons.
- Recognized by the Ministry of Foreign Affairs of the Republic of Korea as an outstanding leader of Korean heritage worldwide

Thank you for considering me for this position. I pledge to be your voice on the AMA Board of Trustees and to do everything I can to move health care into a better state of health.
Willie Underwood, MD, MSc, MPH, credits his journey from a single parent household in Gary, Ind., to becoming a physician and researcher at the Roswell Park Cancer Institute in Buffalo to his family’s belief in that old-adage, “where there is a will, there is a way.”

It’s the force multipliers—his family, Morehouse and SUNY Upstate Medical University teachers and his University of Michigan and Roswell Park colleagues—to which he attributes his success as a physician and leader in medicine and to the good work that collective will can achieve.

He is a robotic surgeon specializing in prostate cancer who also holds an associate professor position in the Department of Urology of Roswell Park Cancer Institute and oversees research focusing on methods to improve the early detection and treatment of prostate cancer.

**He has made leadership contributions at all levels of organized medicine:**
- Chair, AMA Council on Legislation
- Chair, AMA Resident and Fellow Section
- Founding member, American College of Surgeons Resident and Associate Society
- Founder, AUA Resident Committee
- AMA delegate from American Urological Association Chair, Wayne County Michigan Medical Society Legislative Committee
- Chair, Erie County New York Medical Society Legislative Committee
- Co-chair Erie County New York Medical Society Health Law Committee
- President, Erie County New York Medical Society
- Chair, Medical Society of the State of New York Quality Improvement and Patient Safety Committee

In his advocacy work, Willie is proudest of getting prostate cancer early detection legislation successfully passed in Maryland and Michigan, chairing the AMA Council on Legislation, and leading the AMA Council on Legislation Augmented Intelligence Working Group.

His contributions to medicine have not gone unnoticed and his accolades include Robert Wood Johnson Clinical Scholar, AUA Rising Star and SUNY Upstate Outstanding Young Alumni.

Willie knows first-hand that today’s physicians and their patients face what appear to be insurmountable obstacles—from mind-numbing, time-wasting prior authorization to medical school debt to physician burnout to MACRA/MIPS and all the other alphabet assemblages. He has the experience—and the will—to roll up his sleeves and join in the work of our Board of Trustees to make things better for our physicians and our patients.

The American Urological Association and the American Association of Clinical Urologists ask that you join the American College of Surgeons, the Specialty and Service Society (SSS), Young Physicians Section, Large Urology Group Practice Association and the Medical Society of the State of New York in their proud support of Dr. Underwood’s candidacy for the AMA Board of Trustees.

When he’s not busy taking care of his patients or participating in organized medicine, Willie enjoys serving as sous chef to his 10-year-old daughter Amina.

**Personal statement:**
“More than 150 years ago, doctors gathered in Philadelphia to form an AMA dedicated to professionalism, advocacy and ethics...goals as noble and worthy today as they were then. I feel privileged to be part of such a proud heritage.”
The American Academy of Ophthalmology, AMA Ophthalmology Section Council, AMA Resident and Fellow Section (RFS), Massachusetts Medical Society (MMS), and New England delegation are pleased to endorse Grayson W. Armstrong, MD, MPH, for election to the resident and fellow seat on the AMA Board of Trustees.

Dr. Armstrong has held numerous local, state, and national positions in organized medicine. He currently serves on the AMPAC Board of Directors, executive committee of the Massachusetts Society of Eye Physicians and Surgeons, MMS RFS governing council, and delegate to the AMA House of Delegates, a position he has held since medical school. He previously served on the AMA Medical Student Section (MSS) and AMA-RFS governing councils.

As a resident in ophthalmology at Massachusetts Eye and Ear/Harvard Medical School, Dr. Armstrong has focused extensively on medical education, health policy, and health care entrepreneurship. As chief resident and director of the Ocular Trauma Service in the 2019–2020 academic year, he will help oversee the clinical and surgical education of 24 residents.

While at the Warren Alpert Medical School of Brown University, the AMA’s “Accelerating Change in Medical Education” initiative granted $1 million to his institution to integrate population health into primary care. Dr. Armstrong subsequently organized a panel of medical students from each initiative school to provide feedback to consortium investigators, ensuring the “trainee perspective” was included in the future of medical education.

Dr. Armstrong developed a keen interest in health policy while at Brown University, leading to a Master of Public Health degree from the Harvard School of Public Health. He focused on domestic and global health policy and advised the Jordanian government and various non-governmental organizations on policies surrounding Syrian political refugees. Dr. Armstrong subsequently served as an FDA Health Policy fellow through the AMA, which pushed him to tackle the opioid epidemic in Massachusetts by obtaining residents’ and fellows’ access to the state prescription monitoring program through regulatory reform.

Dr. Armstrong’s policy and entrepreneurial interests include access to care, telemedicine, and health care technology. He is founder of a tele-ophthalmic medical device company bringing eye exams to remote areas across the globe. He helped create a health systems hackathon and an innovation challenge while serving on the AMA-MSS and AMA-RFS governing councils.

Dr. Armstrong’s leadership ability and experience will allow him to provide valuable input on the AMA’s strategic focus areas and move our organization forward while maintaining the unique perspective of medical trainees nationwide.

Personal statement:
“My goal is to support the AMA’s mission of promoting the art and science of medicine and the betterment of public health by pushing the focus of the AMA to the forefront of medicine. As the health care landscape evolves and medical education shifts to create medical doctors poised to tackle the future challenges of our profession, the resident and fellow perspective will be crucial in ensuring our nation’s health system is promoting health and tackling disease on behalf of our nation’s patients.”

Grayson W. Armstrong, MD, MPH
The Illinois State Medical Society (ISMS) and its delegation to the American Medical Association are proud to nominate Thomas M. Anderson, MD, for election to the AMA Council on Constitution and Bylaws. Dr. Anderson’s candidacy is enthusiastically endorsed by the Great Lakes States Coalition, the AMA Radiology Section and the Chicago Medical Society.

Throughout his career Dr. Anderson has maintained membership and embodied the ideals of the AMA. Dr. Anderson has served with distinction on the Illinois AMA delegation since 2011.

His leadership at every level of organized medicine includes long service to his state and county medical societies, as well as local and national radiology organizations. He has served as president of ISMS, the Chicago Medical Society, the Chicago Radiological Society and Illinois Radiological Society. Of particular relevance to the office he is seeking is Dr. Anderson's current service as chair of an ISMS special committee that successfully reshaped ISMS’ approach to governance, membership, and its annual meeting. Leading during times of change requires the ability to listen to many perspectives, decipher conflicting feedback, and direct these viewpoints into effective organizational policy direction.

Dr. Anderson is currently in active practice as a clinical associate professor of radiology at the University of Illinois at Chicago. Training residents on the cutting edge of a rapidly advancing specialty, he understands the future of the medical profession and how physician careers are changing/evolving. He previously worked in private practice and served in the U.S. Navy Medical Corps., ending service as a lieutenant commander. He received pre-medical training at Princeton University and is a graduate of Harvard Medical School. He completed both his internship and residency at the University of Chicago, followed by a nuclear imaging fellowship at Michael Reese and University of Chicago hospitals.

Personal statement:
“I seek a position on the Council on Constitution and Bylaws because I have always appreciated the process by which volunteer medical organizations arrive at policies that promote improvement of patient care. The precision of governing language, the fairness of orderly debate and the accuracy of bylaws to reflect the expressed will of the group are all fascinating to me. The CC&B is a place where, if chosen, I believe I could help advance the goals of our AMA.”

Thomas M. Anderson, MD
The Utah Medical Association (UMA) and the PacWest Conference are proud to nominate Dr. Mark N. Bair for election to our AMA Council on Constitution and Bylaws. Dr. Bair is also endorsed by the American College of Emergency Physicians (ACEP), Section Council on Preventive Medicine and the AMA Young Physicians Section.

Dr. Bair is a full-time emergency physician and medical director for his hospital ED. He is the chair of the HCA Mountain Division ED Medical Director’s Council. He sits on the board of directors for his physician-owned and directed company with over 600 clinicians in six states.

Our AMA Council on Constitution and Bylaws is vital to ensuring we have a strong foundation of process and procedure through rules and regulations that we create to assist our AMA-HOD in creating the best policy for our physicians and patients. Council members must be strong leaders, experienced, knowledgeable, passionate, committed and consistent. They must have an eye for detail; know and understand the structure of the AMA Sections and Councils; and have an understanding of parliamentary procedure and speaker responsibilities.

**AMA and Organized Medicine Service and Leadership –**
- Dr. Bair started as a medical student in 1988. He served in the AMA’s MSS, RFS and YPS.
- AMA-RFS vice chair and AMA-YPS chair.
- AMA PacWest Conference organizer.
- AMA Speaker Advisory Committee.
- AMA Western Mountain States Conference (WMSC) speaker.
- Member of the American Institute of Parliamentarians.
- UMA Board of Directors.
- UMA HOD parliamentarian since 2012.
- UMA past president and speaker.
- Utah ACEP Board for 20 years.
- Multiple experiences with bylaws; entity development and restructuring; vision and mission statements; and articles for businesses.

**Passion, Commitment and Consistency –**
- Advocates for patients and physicians in Utah and Washington, D.C.
- Clinical informatics training.
- Speaker on health care reform.
- UHIN HIE board and chair of their privacy and security committee.
- ACEP Hero of Emergency Medicine.
- Utah Association of EMT’s Medical Professional of the Year.
- Utah Emergency Physician of the Year.

**Credentials –**
- University of Utah College of Medicine and Pharmacy.
- University of Illinois (UIC) in Chicago residency in emergency medicine.
- Board certified in emergency medicine and clinical informatics.
- ACEP fellow.

**Personal statement:**
“The AMA-HOD work we do MATTERS! We are dedicated to Article II of the AMA Constitution to “…promote the science and art of medicine and the betterment of public health.” I applaud our HOD members who take the time from their busy practices to develop strong and supported policy for our physicians and patients. I believe strongly that physicians must be a part of developing policy to improve medicine. In a world of health care transformation, political competition, regulatory burdens and financial restrictions, we care for patients with our teams and we must be heard.”
Sherri Baker, MD

When Sherri Baker, MD, counts her lucky stars, the one that shines brightest is having had wise and wonderful mentors at every step of her journey in medicine.

On her second day in medical school at the University of Oklahoma, her future mentors encouraged her to join county and state medical associations, as well as the American Medical Association, and to not be just a joiner, but to become an active participant. Taking their advice to heart, she presented the first-ever Oklahoma resolution to the AMA-MSS on presumed consent for organ donation. Although it was not adopted, she was not discouraged and, in fact, was energized by the experience.

A residency in pediatrics at Kapi‘olani Hospital for Women and Children in Hawaii and a fellowship in pediatric cardiology at Duke University School of Medicine gave Sherri a chance to experience and learn about the range of practice in American medicine. However, an opportunity to practice pediatric cardiology at her alma mater lured her back to the Sooner State where she resumed her involvement in organized medicine.

Six months into her practice, she was elected to the Oklahoma delegation to the AMA and has been an active participant ever since. Her work in the organization led to other involvement in the Oklahoma State Medical Association where she served as speaker and later as the youngest-ever elected president. It was during her presidency that the nurse practitioners launched a campaign before the state legislature to gain independent practice. Sherri led Oklahoma physicians in successfully defeating that misguided attempt and in providing legislators with an alternative path to addressing the physician shortage in their state.

At her day job, Sherri devotes her time to a busy clinical practice and the OU College of Medicine administrative duties. Over the past 13 years as dean of admissions, she has led a team in revising the school’s admissions process with a focus on a quantitative, evidence-based system. This system focuses not only on academic preparedness but on personal traits, such as resilience and reliability, that are critically important in our profession. Now, Sherri would like to bring her years of experience in daily practice and in medical education to the work of the AMA Council on Medical Education.

Despite a full schedule, fall Saturdays find Sherri cheering on her beloved Oklahoma Sooner football team or outside enjoying a game of golf with friends.

The Oklahoma State Medical Association is joined by the American Academy of Pediatrics, the American College of Cardiology, the American Society of Anesthesiologists, the Heart Rhythm Society, Heart of America Caucus and the Oklahoma County Medical Society in asking for your vote to elect Sherri Baker, MD, to the AMA Council on Medical Education.

Personal statement:
“Medical education is a journey. Sometimes we are the learner and sometimes we are the teacher. Sometimes we are both. Always, we are changed.”
Kelly J. Caverzagie, MD

The Nebraska Medical Association is pleased to announce the candidacy of Kelly J. Caverzagie, MD, FACP, FHM, for the AMA Council on Medical Education. A practicing hospitalist and leader at the University of Nebraska Medical Center (UNMC), Dr. Caverzagie is committed to the transformation of health professions education to better meet the needs of patients and populations. As the associate dean for educational strategy, Kelly is leading a large-scale curricular redesign for the UNMC College of Medicine. In his role as vice-president for education at Nebraska Medicine, the clinical partner of UNMC, he has established the Office of Health Professions Education, a department housed within the hospital that is dedicated to the improvement of learning within the clinical environment. As a result, the hospital and health system are actively engaged in optimizing medical education for students, residents and faculty.

Kelly has also been a leader in education at the AMA for many years. As a member of the AMA Medical Student Section, he led the section to pursue stronger AMA policy on medical education debt. In residency, Kelly was elected to serve a three-year term as the resident physician member of the AMA Council for Medical Education. During this time, he advocated for strong AMA policy relating to resident physician duty hours, the USMLE Step 2 clinical skills exam and the Initiative to Transform Medical Education, a precursor to the very successful AMA “Accelerating Change in Medical Education” initiative. He has also served as vice-chair of the AMA Resident and Fellow Section. After entering academic practice, Kelly continued to engage in leadership, serving as the founding chair of the AMA-YPS Task Force on MOC where he shepherded the AMA-YPS's partnership with the council to establish strong, principled and effective AMA-HOD policy.

Kelly is at the forefront of national issues in medical education. As the primary author for the Internal Medicine Milestones, he has guided program directors across the country as they apply the milestones to promote resident physician professional growth. He is an international leader in the ongoing study and optimization of the clinical learning environment (CLE), a critical factor in physician practice and patient outcomes, as well as the worldwide movement towards competency-based medical education. Lastly, Kelly has published several innovative proposals related to all-payer GME funding and establishing formal metrics to justify the ongoing public financing of GME. He is known for his ability to tackle the vexing problems in medical education and will continue this as a member of the council.

Dr. Caverzagie is proudly endorsed by the North Central Medical Conference, Nebraska Medical Association, American College of Physicians, the Metro Omaha Medical Society and the AMA Young Physicians Section.

**Personal statement:**

“To advance medical education, we must think differently about how we tackle our most complex and troublesome issues. Incremental thinking will not get us where we need to go. As a member of the CME, I will challenge this narrow way of thinking and push the AMA to lead change for medical education in the future.”
The Massachusetts Medical Society (MMS), New England delegation, American Academy of Pediatrics (AAP), and AMA Young Physicians Section proudly endorse and support the candidacy of Henry L. Dorkin, MD, FAAP, for election to the AMA Council on Medical Education.

Personal statement:
"While our goal of educating compassionate, dedicated and knowledgeable physicians hasn’t changed, the path to get there and obstacles encountered have evolved considerably.

"Urgent Issues Affecting Students and Physicians Now and in the Foreseeable Future
a) Educational debt, both current and that from excessive MOC charges: As chair, Professional Education Committee of the Cystic Fibrosis Foundation (CFF), I lobbied for CFF to pay (in addition to fellowship salaries) up to $7,000/year extra for debt interest. This diminished total debt increases during postgraduate training. We need similar options for all physicians.

b) Time-consuming learning methods, both initial education and CME: We must shorten knowledge-based acquisition time and consider other options, including competency-based as well as duration-based training.

c) Limited physician population diversity: It must expand to broaden care effectiveness in culturally sensitive settings.

d) Financial/organizational barriers limiting specialty career choices: Private practice must remain a viable option.

e) Physician burnout: We must reduce excessive documentation and overregulation, which limit duration of patient-physician interaction and interfere with time to read the medical literature. The judicious implementation of peer-reviewed AI has the potential to help in this area."

Immediate past president of the MMS, Dr. Dorkin serves on its Board of Trustees, Task Force on Opioid Dependence, Task Force on EHR Usability, and committees including publications (NEJM). As an AMA delegate, he is a section member of the AMA-OMSS, AMA Academic Physicians Section, and AMA Senior Physicians Section.

He served on the National Board of Medical Examiners and the American Board of Pediatrics Pulmonology sub-board. As chair of the AAP Pulmonology Section, he established the Annual Workshop on Office Pulmonology. A member of the CFF Medical Advisory Council and chair, Professional Education Committee, he chaired the CFF Center Committee, was elected CFF Center directors’ ombudsman, and worked on CF care guidelines and CME. A member of the Governor’s Task Force on Opioid Medical Education, which produced core curricula for Massachusetts medical and dental schools, he also serves on the Massachusetts Newborn Screening Advisory Committee. He is an annual judge for the New England Science Symposium, Office for Diversity Inclusion and Community Partnership, Harvard Medical School, and is associate editor, Pediatric Pulmonology.

A Johns Hopkins graduate with residency at Johns Hopkins Hospital, he completed a pulmonology fellowship at Boston Children’s Hospital. Founding the Division of Respiratory Diseases and CF at Tufts University, he was professor of pediatrics. After 20 years, he moved to the MGH as CF Center director and clinical research chief, then returned to Children’s in 2008 as division clinical chief until 2017. Currently, he is co-director of the CF Center and CF clinical research, and associate professor of pediatrics at Harvard Medical School.
Sharon P. Douglas, MD

The Southeastern delegation, the Mississippi delegation, the American College of Physicians, the American Society of Anesthesiologists, the AMA Young Physicians Section, and the AMA Academic Physicians Section enthusiastically endorse Sharon P. Douglas, MD, as a candidate for the AMA Council on Medical Education. Dr. Douglas is uniquely qualified given her many years of education leadership and her commitment to the AMA. She will work passionately to improve physician education at all stages of medical education.

Dr. Douglas is associate dean for VA education and professor of medicine at the University of Mississippi School of Medicine. She serves as associate chief of staff for education and ethics at the VA Medical Center in Jackson, Miss., where she treats veterans as a board-certified pulmonologist. She is actively involved in medical education at the medical student, resident, and fellowship levels. She has been awarded several teaching awards including the Alpha Omega Alpha Teacher of the Year Award in 2010 and is in the Teaching Hall of Fame at the medical school. She is currently on the Council of Deans, the Graduate Medical Education Committee, and the Curriculum Committee. She has served on the Students Awards Committee and the Admissions Committee at the University of Mississippi School of Medicine as well. She previously served on a USMLE Step 1 question writing committee for four years.

Dr. Douglas has leadership experience in the AMA. She has previously been chair of the Mississippi delegation and has been a member of the Southeastern delegation’s executive committee. She currently serves on the Governing Council of the Academic Physicians Section. Dr. Douglas previously served on the Liaison Committee on Medical Education Council as a representative from the AMA, chairing that council in her last year of service. She also served on the AMA Council on Ethical and Judicial Affairs, including serving as chair. She has demonstrated an organized, efficient leadership style in her work with the AMA as well as in her work representing the AMA.

Dr. Douglas' background in teaching and medical education administration along with her proven leadership within the AMA make her an exceptionally qualified candidate for membership on the AMA Council on Medical Education. Her passion for education and ethics are the cornerstones of her work as a physician, teacher, education administrator, and AMA leader.

Personal statement:
“I am passionate about medical education across the continuum of medicine, from medical school and postgraduate medical education, and through the work of the private practice, employed, academic, and/or administrative physician. Whether one is a medical student, resident/fellow, or M36 physician like I am, ongoing medical education at every level of medicine is critical to the care of our patients and the communities that we serve. Therefore, medical education across the continuum of learning should be tailored to fit the needs of the patients and community that the individual physician serves—it should be clinically relevant, efficient, and directed toward what we practice, where we practice.”
The California Medical Association (CMA) and the Pac West Conference proudly sponsor Shannon Kilgore, MD, for the AMA Council on Medical Education. With strong support from the American Academy of Neurology (AAN), her nomination is also endorsed by the Neuroscience Caucus, the Specialty and Service Society (SSS), and the AMA Young Physicians Section.

A practicing neurologist specializing in the care of patients with Parkinson’s disease, Dr. Kilgore has shown proven leadership in medical education. During her residency, she was nominated by the AMA Resident and Fellow Section to the Accreditation Council for Graduate Medical Education’s (ACGME) Neurology Review Committee (NRC). As a result, she assisted in the implementation of the ACGME Core Competencies as the resident on the neurology quadrad. In 2010, the AMA nominated her again to the NRC as a full member. She served seven years on the NRC, including four years as vice chair and chair. Throughout her nearly 10 years on the NRC, she introduced common sense into many policies and thus mitigated impact to training programs, faculty, and trainees. She has continued to assist the ACGME in its Milestones 2.0 project.

In addition, as a member of the Education Committee for the AAN, she participates in strategic planning for education in her specialty. She also chairs the AAN committee that ensures the academy meets ACCME standards, and thus works on both continuing and graduate medical education at a national level.

As a clinical associate professor for Stanford University School of Medicine, Dr. Kilgore sees every patient with a student, resident, or fellow at the VA Palo Alto Health Care System. Caring for patients in both the inpatient and outpatient settings, she also teaches neurology to multidisciplinary teams around the hospital. Complementing her educator role, she represents the VA to Stanford’s neurology residency program on its Clinical Competency Committee.

Active in organized medicine at all levels for over 25 years, Dr. Kilgore first engaged with advocacy as a medical student, representing the Texas Medical Association. Early leadership roles included speaker of the AMA Medical Student Section, California delegate to the AMA House of Delegates (HOD), and CMA resident trustee. After completing training, she joined the AAN’s delegation to the AMA-HOD, becoming chair in 2012. She has consistently attended the AMA-HOD since 2006, participating in several reference committees, including chairing Reference Committee D in 2018. Valuing collaboration with other specialties, she has served the SSS Governing Council since 2014. Lastly, she has immersed herself in a variety of committees in her specialty society, recently joining the AAN’s board of directors.

Dr. Kilgore will bring extensive knowledge of education issues, a practical perspective, and a strong commitment to organized medicine to the council. Her breadth of clinical and educational experience and her relentless advocacy on behalf of physicians, residents, and students prepare her to serve the AMA exceptionally well on the Council on Medical Education.
John P. Williams, MD

It has been my privilege and pleasure to serve you as a member of your AMA Council on Medical Education for the last four years. I am proud of our accomplishments over that period and am eager to continue to work to improve the many issues facing all facets of medical education from UME to CME. I continue to work to improve GME accessibility and affordability, find methods to reduce or eliminate medical student debt and to enhance the match process for medical students and residents.

I have worked tirelessly with the council in dramatically changing the landscape for Maintenance of Certification (MOC). While the efforts to improve and redesign MOC continue, much progress has been made by a significant number of the members of the ABMS. We have made great strides, but the overall cost of MOC remains excessive for many specialties. Further, the ABMS itself is undergoing a significant transformation to improve its relationship with physicians and its boards; and if re-elected, I will continue to remain vigilant in this endeavor.

As your representative to the NBME I continue to work to improve the process for the USMLE examinations. Students have long suggested that the Step 2 CS examination is redundant, expensive and poorly structured. Working through the Advisory Committee to the NBME, communication to our student colleagues involved in the testing process has improved, and the NBME has committed to working to reduce the cost of the exam. The NBME has also added an FAQ section, an urban myth section and an enhanced website that helps to explain the process of scoring as well as how to best prepare for the exam.

In response to numerous criticisms of the use of Step 1 scores as a “screening tool” for residencies, the NBME has commissioned a group that will meet this spring to examine alternative methods for both scoring the Step 1 examination as well as enhanced techniques to assist residencies in applicant screening. The NBME has also worked to improve the feedback to students regarding items that they missed. These are all items that our AMA has worked to improve for the benefit of our student members.

As a member of the Undergraduate Medical Education Committee, we examined and brought forward several reports that have helped to improve a number of issues affecting our medical student colleagues including competition for residency training slots from ancillary providers; expansion of medical schools without provision for GME training and efforts to curtail the explosive growth in medical student debt. These reports aim to not only improve the lives of U.S. medical students but graduate medical trainees as well.

The Bridge Committee worked with the ACCME to reduce the regulatory burden that was often imposed on smaller hospitals and systems to retain their status as CME providers and are not effectively “priced” out of the market.

These are just a few of the many successes we have enjoyed over the last four years, but much work remains. My name is John P. Williams, MD, and I ask for your vote to continue to pursue the important work of the AMA Council on Medical Education.
A. Patrice Burgess, MD

The Idaho Medical Association proudly nominates A. Patrice Burgess, MD, FAAFP, for election to the AMA Council on Medical Service. She is enthusiastically endorsed by the PacWest Caucus and the American Academy of Family Physicians.

Dr. Burgess has practiced family medicine in a variety of practice settings beginning with her military service upon completion of her residency. She transitioned into an academic practice for a number of years prior to joining a small group private practice and is currently an employed physician in a large multispecialty group. Dr. Burgess maintains a full spectrum family medicine clinical practice.

She also serves as the chief medical informatics officer for her health system and was elected chair of the Leadership Council of her large multispecialty medical group. Patrice has spent her professional life advocating for a transformed health care environment for physicians and patients.

Well aware of the regulatory burdens facing physicians, Patrice has worked to reduce physician burnout by striving to provide physicians with effective and efficient work tools and positive workflow designs. She is passionately dedicated to improving the day to day life of the practicing physician and helping reform our health care system to a more supportive system for physicians and patients. Dr. Burgess well understands the nuance of policy details and the importance of negotiation to ensure the best solution to the problems facing medicine. Health system reform is one of the driving forces that fuels her passion to work within organized medicine.

Dr. Burgess has extensive experience representing physicians of all specialties and modes of practice. She served as the alternate delegate for the AMA Young Physicians Section (YPS) prior to serving as chair of the AMA-YPS and was elected the first female president of the Idaho Medical Association. Patrice has been active in the AMA for more than 25 years, serving on numerous reference committees, two of which she chaired. She is known for being a good listener, as well as being fair in deliberations, serving as a skilled negotiator, and maintaining a high ethical standard.

Dr. Burgess was appointed to serve on the Committee on the Organization of Organizations, as well as the Strategic Advisory Group Extraordinaire. Patrice is a member of the AMA Integrated Physician Practice Section, the Private Practice Physicians Caucus, and the AMA Women Physicians Section.

Dr. Burgess is a strong proponent of organized medicine and works to encourage more diverse representation within the AMA and her state organization. Patrice passionately believes that our AMA is uniquely positioned to help forge a better health care system for patients and physicians.

Personal statement:
“As a practicing physician I live the impediments of a broken medical system daily. Prior authorization, medication costs, unfair payment practices and make-you-crazy computer mouse clicks stand in the way of practicing medicine. I am excited to take my experience and passion to the Council on Medical Service and help our AMA continue to be at the forefront of improving our health care system and the practice environment for physicians and patients.”
Thomas Madejski, MD

The Medical Society of the State of New York is proud to sponsor Dr. Tom Madejski’s candidacy for re-election to the AMA Council on Medical Service.

Personal statement:
“Having practiced for more than 30 years in a small, rural community in upstate New York I have witnessed the erosion of physician autonomy and interference with our relationship with patients. The Council on Medical Service provides critical information to our House of Delegates and Board of Trustees to develop policies that put our patients first, improve the practice of medicine, and create a more satisfying environment in which we practice.

“I have been honored to serve on the Council on Medical Service and have helped to develop recommendations to help foster an environment in which physicians can focus their efforts on what they do best … practicing medicine. As our practice environment continues to evolve, the council should continue to develop policies that help our members integrate telemedicine, new health technologies, and evolving self-direction of care by patients.

“Our aging population will need more medical service and physicians need to continue to lead the healthcare team and work with non-physician caregivers to improve the health of our patients. We need to continue to advocate for pluralism in the healthcare system to give patients and physicians choice in how to best meet the needs of our patients. The council needs to continue to look at Alternate Payment Models, and continue to review healthcare financing options.

“Recent Council on Medical Service work has involved the crucial issues of site-of-service differentials, hospital consolidations, the role of retail health clinics and the need for better aligning clinical and financial incentives for high-value care. We need to continue to work to develop policies that encourage patients and insurers to access and afford our highest value care and secondary and tertiary preventive strategies.

“The AMA has the strength and stamina to deal with these issues, and the council will help guide the AMA in developing policy in these areas. I am asking for your vote to continue to help move this process forward.”

Tom Madejski’s background in medicine
Dr. Madejski earned an undergraduate degree in pharmacy at the State University of New York at Buffalo before graduating with his medical degree at the State University of New York’s Health Science Center in Syracuse, New York. His career has had a major focus on geriatric medicine and palliative care. Dr. Madejski holds faculty appointments as a clinical instructor in pharmacy at the University of Buffalo, and clinical instructor in medicine at the University of Rochester School of Medicine, and is Board Certified in internal medicine, geriatric medicine, and in hospice and palliative care medicine. He has been an AMA member for more than 35 years.

Dr. Madejski has held numerous posts within the Medical Society of the State of New York (MSSNY). He served as MSSNY president 2018–2019. He is a member of the MSSNY Committee on Collective Negotiations and Implementation as well as the executive committee of MSSNYPAC. He has also served as chair of the MSSNY Strategic Planning Committee.
The American College of Physicians is proud to sponsor Noel N. Deep, MD, FACP, for re-election to the AMA Council on Science and Public Health. Dr. Deep is also endorsed by the Specialty and Service Society (SSS), Wisconsin Medical Society (WMS), and the AMA Young Physicians Section (YPS). Dr. Deep is a distinguished internist in private practice in Antigo, Wis., who is dedicated to improving public health and educating the public about the science of medicine. He is currently serving on the State of Wisconsin’s Council for Immunization Practices. In his local community, he contributes monthly articles on a variety of health topics to the Antigo Daily Journal and has coordinated several community education sessions with a focus on preventive health care. He also serves on the editorial board of Internal Medicine News. Dr. Deep has been involved in organized medicine since the beginning of his career and has served in leadership roles at the local, state and national level.

**History of commitment and dedication to the AMA**

- Member, AMA House of Delegates since 2008
- Member, AMA Council on Science and Public Health 2015–present
- Chair, AMA Reference Committee B (I-2012) and member, Reference Committee G (A-2009)

**Leadership**

- President, Wisconsin Medical Society 2017–2018
- Governor, ACP Wisconsin Chapter 2018–present
- Member, Wisconsin Medical Society Board of Directors 2010–present
- Chief of staff, Langlade Hospital, 2006–2013
- Member, ACP Board of Regents 2012–2013

**Recognition/ awards**

- ACP Wisconsin Chapter’s Addis Costello Internist of the Year Award 2015
- AMA Foundation’s Young Physician Leadership Award 2009

**Education and credentials**

- MD degree, Osmania Medical College, Hyderabad, India
- Internal medicine residency, Chicago Medical School/Finch University of Health Sciences

**Personal statement:**

“A strong emphasis on public health and evidence-based medicine is essential to provide high quality healthcare. CSAPH’s reports and recommendations serve to enhance and advance our AMA’s vital role as the national leader in health advocacy. I am qualified, passionate, willing and able to continue my service to our AMA, patients and medicine. I request your vote to continue my work on this important council.”
The Colorado Medical Society and the PacWest Conference are proud to nominate Tamaan Osbourne-Roberts, MD, FAAFP, for election to the AMA Council on Science and Public Health.

Dr. Osbourne-Roberts serves concurrently as chief medical officer for the Colorado Department of Health Care Policy and Financing, as well as chief medical officer for the independent administrator of the Colorado All-Payer Claims Database. As the physician executive for both the state agency overseeing Colorado’s $9.4 billion Medicaid program and the entity administering one of the country’s most powerful sources of claims-based health data, he combines scientific evidence, digital tools, community resources, and economic levers into programs that maximize the health of Colorado’s population, individually and collectively.

A bilingual, board-certified family physician, Dr. Osbourne-Roberts has spent his entire clinical career providing primary, hospital, and palliative care to impoverished communities throughout Colorado. An alumnus of the Colorado Health Service Corps. and recognized for his service to the state by the Colorado Department of Public Health and Environment with its 2016 Corps Community Day Award, he continues to provide care to Colorado’s most underserved communities.

Having served in the AMA-HOD since 2005, initially as a regional delegate and Governing Council delegate for the AMA-MSS, Dr. Osbourne-Roberts now serves as a Colorado delegate. A member of the AMA’s External Advisory Committee for Value-Based Care, he also sits on the American Academy of Family Physicians (AAFP) Commission on Quality and Practice. As the youngest and first black president in the Colorado Medical Society’s 143-year history, he oversaw the digitization of the society’s governance structure, and convened the organization’s first working group of public health medical officers. He has served as a trustee of the Colorado Hospital Association, as president of the Colorado Academy of Family Physicians, and as a board member of the Denver Medical Society.

An AMA Foundation Leadership Award winner, Dr. Osbourne-Roberts was named a member of the Denver Business Journal “40 Under 40” Class for 2015, and a 2016 Aspen Institute Spotlight Health Scholar. An avid philanthropist, he currently serves on the AMA Foundation board, as well as the boards of the Malawi Breastfeeding Initiative and the Colorado Academy of Family Physicians Foundation.

Dr. Osbourne-Roberts completed his undergraduate degree at Williams College, and his medical degree and family medicine residency training at the University of Colorado School of Medicine, where he continues to serve as an adjunct assistant professor. He was recently selected as the University of Colorado School of Medicine keynote commencement speaker for 2019, where he had served as student class speaker 12 years prior.

Personal statement:
“Integrating hard science, population health strategies, and clinical acumen into cohesive approaches for creating healthy communities and individuals is my daily ‘bread and butter’... both in my clinical and policy careers. I hope to use this skill set in service to my colleagues at the AMA Council on Science and Public Health.”
My name is Bruce Smoller, and I am running for re-election to the AMA Council on Science and Public Health as an incumbent.

I am very proud to serve the interests of my colleagues and our patients as a delegate to our AMA, an elected member of the Council on Science and Public Health for the last four years, a member of the Southeastern delegation, and chair of the Maryland delegation to our AMA.

I am a board-certified psychiatrist, recently retired from the active practice of adult psychiatry after 42 years in Chevy Chase, Md., just outside of Washington, D.C. I currently work part time as a consultant to the federal government.

I received my undergraduate degree at Cornell University and my medical degree at Tulane. I trained at Cornell’s Payne Whitney clinic at New York Hospital with research and clinical modules at Sloan-Kettering and Hospital for Special Surgery in New York.

I taught at George Washington University School of Medicine from 1976 to 2016 with a final rank of clinical professor of psychiatry and behavioral health. I have been active in research as the psychiatric consultant to the Pain Studies Unit at National Institutes of Health (NIH) for 23 years, from 1979 to 2002, and as such participated in all clinical research on pain at NIH.

I have been active in my county and state societies for over 30 years and have been president of the Montgomery County Medical Society and MedChi, the Maryland State Medical Society. I have been on the boards of both societies for over 10 years, and currently chair the Communications Council of MedChi. I am also a founding board member of our county’s foundation. I was editor in chief of the state society journal, *Maryland Medicine*, for 19 years, from 1999 to 2018.

My reasons for running for a second term on the Council on Science and Public Health are several. It has been my honor to serve with a group of colleagues and staff who are as knowledgeable, committed, and stimulating as anywhere I have served. We have, over the past four years, I feel, contributed to our AMA’s missions of advocacy, education and research by promoting the tenets of scientific accuracy and public health.

We have a vital and robust constituency in our patients, but our patients will remain our allies in our advocacy efforts only so long as we undergird our pronouncements with solid science. If our AMA bases its policies on scientific principles and communicates those principles in the service of our patients, we will continue to grow stronger and continue to be respected, trusted and supported. Our AMA is the most respected repository of medical information to which our patients and the public can turn, an arbiter of diverse and often conflicting medical information, and a beacon to our patients, our colleagues and our policymakers.

I am proud to be endorsed by MedChi, the Maryland State Medical Society, the Southeast delegation, and the Neuroscience Council for re-election to the Council on Science and Public Health.

I respectfully ask to be returned for another four years to the Council on Science and Public Health.

Thank you.
Corliss Varnum, MD

Dr. Corliss Varnum has a perspective that is difficult to find in our world of medicine. Having spent years as an over-the-road union trucker before going on to college and medical school, his understanding of the hardships faced by his patients in rural New York is perhaps unique. Oswego, N.Y., is a blue-collar community where practical trumps sophisticated or nuanced. Dr. Varnum fits right in. He runs a small practice where patients are afforded the best in medicine with a realistic understanding that getting them back to work means their families will be fed and the rent will be paid. Importantly, Dr. Varnum has a long and productive history of working on AMA reference committees and within New York’s AMA delegation. He has a special interest in the work of the AMA Council on Science and Public Health.

Personal statement:
“I live in a rural community where I have witnessed the incredible impact of opioids among young and middle-aged patients. New York State experienced a 7 percent increase in opioid deaths last year and my hometown of Oswego has seen opioid deaths and opioid related hospital admissions skyrocket over the past 36 months. Administering Naloxone by our police and EMS crews is an everyday experience. We need a better understanding of ways that new psychoactive substances (NPS) are entering the marketplace and better ways to educate young people about their dangers. The recent JAMA article associating drug overdose with concentration of marketing efforts by pharmaceutical companies is helpful, but it is too easy to just point to Purdue and other companies as culprits in this macabre scenario. I also have a concern that physicians may become severely restricted in their legitimate, rational and prudent ability to write prescriptions for patients who are in real need of pharmacological help. The Council on Science and Public Health should continue to be the forum for discussing this problem and advising the HOD and the AMA Board of Trustees on this critical issue. I believe that I can contribute to this dialogue.”

Dr. Varnum has been an active AMA member since 1994 and has been appointed to numerous AMA reference committees. In 2017 he chaired the Reference Committee on Science and Public Health. His candidacy is endorsed by the Medical Society of the State of New York and the New York State Academy of Family Practice.
Laura Halpin, MD, PhD

Laura Halpin, MD, PhD, is a third-year psychiatry resident at UCLA who will be starting her first year in a child and adolescent psychiatry fellowship at UCLA in July of 2019. Laura is originally from Cleveland, Ohio, and went to medical school, completing a combined MD/PhD, at the University of Toledo. Laura has a PhD in neuroscience and neurological disorders, and her dissertation focused on the neurotoxicity of methamphetamine. She has been actively involved in the AMA since the start of medical school. She currently serves on the AMA Resident and Fellow Section Governing Council as vice speaker and as a sectional delegate from the RFS to the AMA House of Delegates, sponsored by the American Psychiatric Association. As both a medical student and now a resident, Laura has served as a delegate to the AMA-HOD for nearly five years. She has also previously served as the medical student on the AMA Council on Science and Public Health, as a medical student for two years, and she is currently a member of the California Medical Association’s Council on Science and Public Health. She also recently completed a two-year term as the chair of the CMA-RFS. Laura is also a leadership fellow of the American Psychiatric Association and Foundation and serves as a member of the APA’s Council on Healthcare Systems and Financing. Beyond that, her clinical interests and training to become a child psychiatrist focused on substance-use disorder research, which places her work directly at the intersection of policy, science and public health.

Laura is the only candidate for this position who is endorsed by the AMA Resident and Fellow Section. She is also endorsed by the PacWest Conference, the Section Council on Psychiatry and the Neuroscience Caucus.