

A note from your speakers

We are pleased to provide this edition of the American Medical Association Election Manual. It includes write-ups from announced candidates for election in June 2024, along with the current bylaws and policy governing the conduct of campaigns. Questions and concerns may be directed to the speakers at hod@ama-assn.org.

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. We trust you will find this manual user-friendly and robust, but suggestions for future editions are always welcome—simply send your comments to hod@ama-assn.org.

Sincerely,

Lisa Bohman Egbert, MD
Speaker

John H. Armstrong, MD
Vice speaker

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General election information

Elections

Officers and four councils are elected by the American Medical Association House of Delegates (HOD) at the June Meeting. Candidates for these offices are widely solicited throughout the Federation. The elections are conducted during a special Election Session under the supervision of the Committee on Rules and Credentials and the chief teller, who are appointed by the speakers. The speaker and vice speaker are responsible for overall administration of the elections.

Nominations will be accepted on Friday, June 7, 2024, during the Opening Session of the HOD. Uncontested candidates will be elected by acclamation at that time. Voting for contested elections will be held during the Election Session on Tuesday, June 11, 2024, at 8 a.m. All delegates should be seated in the House at least 10 minutes prior to the Election Session.

Only credentialed delegates are permitted to cast a ballot. If a delegate cannot participate in the Election Session, they may designate a substitute delegate who must be properly credentialed by Monday, June 10, 2024, at 6 p.m., Central time.

Candidates are listed on the ballot in alphabetical order by name only. AMA bylaws require ballots that call for the exact number of votes for each vacancy. Each ballot clearly states the number of votes that should be cast, and our voting system will ensure that only appropriately completed ballots will be counted. A majority vote of the legal ballots cast is required for election. Candidates who are elected officially take office at the conclusion of the AMA-HOD meeting.

Group interviews

Caucuses and delegations may choose to conduct virtual or in-person interviews. Groups are not required to interview candidates for all contests, and they may choose different methods for different contests. They are required to interview all currently announced candidates within a given contest via the same method, virtual or in person. Any group that wishes to conduct in-person or virtual interviews must complete an Interviewing Group Form with the contact information for the individual responsible for scheduling interviews. Groups must specify the contests for which they wish to interview and whether in-person or virtual interviews are to be conducted.

Deadlines for submission of this information to the HOD Office are as follows:

April 24: Interviewing group deadline to submit form indicating intent to conduct virtual interviews

May 17–22: Virtual interview window

May 22: Interviewing group deadline to submit form indicating intent to conduct in-person interviews

June 7–10: In-person interview window

The HOD Office will compile the list of groups wishing to interview for each position and send it to the candidates to schedule directly with the designated contact persons. It is the responsibility of the candidates to contact the group's designated person to arrange an interview. **Candidates may not schedule interviews with groups that are not on the official list.**

AMA Candidate Reception

Our AMA will host the AMA Candidate Reception. Candidates may be featured at this reception or at another reception, but not both. The AMA Candidate Reception is scheduled from **5 p.m. to 7 p.m., Sunday, June 9, 2024.**

Election bylaws

Election bylaws

Qualifications (3.2)

3.2.1 General. An officer, except the public trustee, must have been an active member of the AMA for at least 2 years immediately prior to election.

Elections (3.4)

3.4.1 Time of Election. Officers of the AMA, except the Secretary, the medical student trustee, and the public trustee, shall be elected by the House of Delegates at the Annual Meeting, except as provided in Bylaws 3.6 and 3.7. The public trustee may be elected at any meeting of the House of Delegates at which the Selection Committee for the Public Trustee submits a nomination for approval by the House of Delegates. On recommendation of the Committee on Rules and Credentials, the House of Delegates shall set the day and hour of such election. The Medical Student Section shall elect the medical student trustee in accordance with Bylaw 3.5.6.

3.4.2 Method of Election. Where there is no contest, a majority vote without ballot shall elect. All other elections shall be by ballot.

3.4.2.1 At-Large Trustees.

3.4.2.1.1 First Ballot. All nominees for the office of At-Large Trustee shall be listed alphabetically on a single ballot. Each elector shall have as many votes as the number of Trustees to be elected, and each vote must be cast for a different nominee. No ballot shall be counted if it contains fewer or more votes than the number of Trustees to be elected, or if the ballot contains more than one vote for any nominee. A nominee shall be elected if he or she has received a vote on a majority of the legal ballots cast and is one of the nominees receiving the largest number of votes within the number of Trustees to be elected.

3.4.2.1.2 Runoff Ballot. A runoff election shall be held to fill any vacancy not filled because of a tie vote.

3.4.2.1.3 Subsequent Ballots. If all vacancies for Trustees are not filled on the first ballot and 3 or more Trustees are still to be elected, the number of nominees on subsequent ballots shall be reduced to no more than twice the number of remaining vacancies less one. The nominees on subsequent ballots shall be 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. When 2 or fewer Trustees are still to be elected, the number of nominees on subsequent ballots shall be no more than twice the number of remaining vacancies, with the nominees determined as indicated in the preceding sentence. In any subsequent ballot the electors shall cast as many votes as there are Trustees yet to be elected, and must cast each vote for different nominees. This procedure shall be repeated until all vacancies have been filled.

...

3.4.2.2 All Other Officers, except the Medical Student Trustee and the Public Trustee. All other officers, except the medical student trustee and the public trustee, shall be elected separately. A majority of the legal votes cast shall be necessary to elect. In case a nominee fails to receive a majority of the legal votes cast, the nominees on subsequent ballots shall be determined by retaining the 2 nominees 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 procedure shall be continued until one of the nominees receives a majority of the legal votes cast.

Election bylaws (continued)

3.4.2.3 Medical Student Trustee. The medical student trustee is elected by the Medical Student Section in accordance with Bylaw 3.5.6.

3.4.2.4 Public Trustee. The public trustee shall be elected separately. The nomination for the public trustee shall be submitted to the House of Delegates by the Selection Committee for the Public Trustee. Nominations from the floor shall not be accepted. A majority vote of delegates present and voting shall be necessary to elect.

...

Elections (6.8)

Council on Constitution and Bylaws, Council on Medical Education, Council on Medical Service, and Council on Science and Public Health

6.8.1 Nomination and Election. Members of these Councils, except the medical student member, shall be elected by the House of Delegates. Nominations shall be made by the Board of Trustees and may also be made from the floor by a member of the House of Delegates.

6.8.1.1 Separate Election. The resident/fellow physician member of these Councils shall be elected separately. A majority of the legal votes cast shall be necessary to elect. In case a nominee fails to receive a majority of the legal votes cast, the nominees on subsequent ballots shall be determined by retaining the 2 nominees 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 procedure shall be continued until one of the nominees receives a majority of the legal votes cast.

6.8.1.2 Other Council Members. With reference to each such Council, all nominees for election shall be listed alphabetically on a single ballot. Each elector shall have as many votes as there are members to be elected, and each vote must be cast for a different nominee. No ballot shall be counted if it contains fewer votes or more votes than the number of members to be elected, or if the ballot contains more than one vote for any nominee. A nominee shall be elected if he or she has received a vote on a majority of the legal ballots cast and is one of the nominees receiving the largest number of votes within the number of members to be elected.

6.8.1.3 Run-Off Ballot. A run-off election shall be held to fill any vacancy that cannot be filled because of a tie vote.

6.8.1.4 Subsequent Ballots. If all vacancies are not filled on the first ballot and 3 or more members of the Council are still to be elected, the number of nominees on subsequent ballots shall be reduced to no more than twice the number of remaining vacancies less one. The nominees on subsequent ballots shall be determined by retaining those who received the greater number of votes on the preceding ballot and eliminating the nominee(s) who received the fewest number of votes on the preceding ballot, except where there is a tie. When 2 or fewer members of the Council are still to be elected, the number of nominees on subsequent ballots shall be no more than twice the number of remaining vacancies, with the nominees determined as indicated in the preceding sentence. In any subsequent ballot the electors shall cast as many votes as there are members of the Council yet to be elected, and must cast each vote for a different nominee. This procedure shall be repeated until all vacancies have been filled.

HOD Policy G-610.090, AMA Election Rules and Guiding Principles

The Speaker and Vice Speaker of the House of Delegates are responsible for overall administration of our AMA elections, although balloting is conducted under the supervision of the chief teller and the Committee on Rules and Credentials. The Speaker and Vice Speaker will advise candidates on allowable activities and when appropriate will ensure that clarification of these rules is provided to all known candidates. The Speaker, in consultation with the Vice Speaker and the Election Committee, is responsible for declaring a violation of the rules.

I. Guiding principles

The following principles provide guidance on how House 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 when voting for candidates.
2. Any electioneering practices that distort the democratic processes of House elections, such as vote trading for the purpose of supporting candidates, are unacceptable. This principle applies between as well as within caucuses and delegations.
3. Candidates for elected positions should comply with the requirements and the spirit of House of Delegates 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.
7. Delegations and caucuses when evaluating candidates may provide information to their members encouraging open discussion regarding the candidates.
8. Delegations and caucuses should be a source of encouragement and assistance to qualified candidates. Nomination and endorsement should be based upon selecting the most qualified individuals to lead our AMA regardless of the number of positions up for election in a given race. Delegations and caucuses are reminded that all potential candidates may choose to run for office, with or without their endorsement and support.
9. Every state and specialty society delegation is encouraged to participate in a caucus, for the purposes of candidate review activities.

II. Guidelines for nominations for AMA offices

1. Every effort should be made to nominate two or more eligible members for each Council vacancy.
2. The Federation (in nominating or sponsoring candidates for leadership positions), the House of Delegates (in electing Council and Board members), and the Board, the Speakers, and the President (in appointing or nominating physicians for service on AMA Councils or in other leadership positions) should consider the need to enhance and promote diversity.

Election policy (continued)

III. Candidate announcement, nominations and open positions

1. Individuals intending to seek election at the next Annual Meeting should make their intentions known to the Speakers by providing the Speaker's office with an electronic announcement "card" that includes any or all of the following elements and no more: the candidate's name, photograph, email address, 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) will not be posted to the website. Printed announcements may not be distributed to members of the House by any method.
2. Announcement cards of all known candidates will be projected on the last day of the Annual and Interim Meetings of our House of Delegates and posted on the AMA website. Following each meeting, an "Official Candidate Notification" will be sent electronically to the House. It will include a list of all announced candidates and all potential newly opened positions which may open as a result of the election of any announced candidate. Additional notices will also be sent out with regular Speaker communications to the HOD and with the Speaker's notice of the opening of active campaigning which generally follows the April Board meeting.
3. Candidates may notify the HOD Office of their intention to run for potential newly opened positions, as well as any scheduled open positions on the elected councils or the Board of Trustees, at any time by submitting an announcement card to the House Office. They will then be included in all subsequent projections of announcements before the House, "Official Candidate Notifications," and in any campaign activity that had not yet been finalized. All previously announced candidates will continue to be included on each Official Candidate Notification. Any candidate may independently announce their candidacy after active campaigning is allowed, but no formal announcement from the HOD office will take place other than on Official Candidate Notifications.
4. The Federation and members of the House of Delegates will be notified of unscheduled potential newly opened positions that may become available as a result of the election of announced candidates. Candidates will be allowed to announce their intention to run for these positions.
5. If a potential newly opened position on the Board or a specified council does not open but there are other open positions for the same council or the Board, an election will proceed for the existing open seats. Candidates will be offered the opportunity to withdraw their nomination prior to the vote. If there are no scheduled open seats on the Board or specified council for which a potential newly opened position is announced and if the potential newly opened position does not open (i.e., the individual with the unexpired term is not elected to the office they sought), no election for the position will be held. In the event that a prior election results in a newly opened position without a nominated candidate or more positions are open than nominated candidates, the unfilled positions would remain unfilled until the next annual meeting.
6. Our AMA believes that:
 - a. specialty society candidates for AMA House of Delegates elected offices should be listed in the pre-election materials available to the House as the representative of that society and not by the state in which the candidate resides;
 - b. elected specialty society members should be identified in that capacity while serving their term of office; and
 - c. nothing in the above recommendations should preclude formal co-endorsement by any state delegation of the national specialty society candidate, if that state delegation should so choose.

Election policy (continued)

7. Our AMA requires completion of conflict of interest forms by all candidates for election to our AMA Board of Trustees and councils prior to their election. Conflict of interest forms must be submitted after an individual has announced their candidacy and before the active campaign window begins or, if not previously announced, within 24 hours of the conclusion of the HOD Opening Session. The HOD Office will post such information on the “Members Only” section of our AMA website before election by the House of Delegates, with links to the disclosure statements from relevant electronic documents.

IV. Communications, campaign memorabilia and literature

1. Active campaigning for AMA elective office may not begin until the Board of Trustees, after its April meeting, announces the candidates for council seats. Active campaigning includes mass outreach activities directed to all or a significant portion of the members of the House of Delegates and communicated by or on behalf of the candidate. If in the judgment of the Speaker of the House of Delegates circumstances warrant an earlier date by which campaigns may formally begin, the Speaker shall communicate the earlier date to all known candidates.
2. 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 will provide a link to the AMA Candidates’ Page, but links to personal, professional or campaign related websites will not be allowed. The Election Manual provides an equal opportunity for each candidate to present the material they consider important to bring before the members of the House of Delegates and should relieve the need for the additional expenditures incurred in making non-scheduled telephone calls and duplicative mailings. 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.
3. The AMA Office of House of Delegates Affairs will provide an opportunity for all announced candidates to submit material to the HOD office which will then be sent electronically by the HOD Office in a single communication to all delegates and alternates. Parameters regarding content and deadlines for submission will be established by the Speaker and communicated to all announced candidates.
4. An AMA Candidates’ Page will be created on the AMA website or other appropriate website to allow each candidate the opportunity to post campaign materials. Parameters for the site will be established by the Speaker and communicated to candidates.
5. Campaign expenditures and activities should be limited to reasonable levels necessary for adequate candidate exposure to the delegates. Campaign memorabilia and giveaways that include a candidate’s name or likeness may not be distributed at any time.
6. A reduction in the volume of telephone calls and electronic communication from candidates and on behalf of candidates is encouraged. The Office of House of Delegates Affairs does not provide email addresses for any purpose. The use of electronic messages to contact electors should be minimized, and if used must include a simple mechanism to allow recipients to opt out of receiving future messages.
7. Campaign materials may not be distributed by postal mail or its equivalent. The AMA Office of House of Delegates Affairs will no longer furnish a file containing the names and mailing addresses of members of the AMA-HOD. Printed campaign materials may not be distributed in the House of Delegates. Candidates are encouraged to eliminate printed campaign materials.
8. Displays of campaign posters, signs, and literature in public areas of the venue at which Annual Meetings are held are prohibited because they detract from the dignity of the position being sought and are unsightly. Campaign posters may be displayed at a single campaign reception

Election policy (continued)

at which the candidate is featured. No campaign literature shall be distributed in the House of Delegates and no mass outreach electronic messages shall be transmitted after the opening session of the House of Delegates.

9. Campaign stickers, pins, buttons and similar campaign materials are disallowed. This rule will not apply for pins for AMPAC, the AMA Foundation, specialty societies, state and regional delegations and health related causes that do not include any candidate identifier. These pins should be small, not worn on the badge and distributed only to members of the designated group. General distribution of any pin, button or sticker is disallowed.

V. Group dinners and meetings

1. Candidates for AMA office should not attend meetings of 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.
2. At any AMA meeting convened prior to the time period for active campaigning, campaign-related expenditures and activities shall be discouraged. Large campaign receptions, luncheons, other formal campaign activities and the distribution of campaign literature and gifts are prohibited. It is permissible for candidates seeking election to engage in individual outreach meant to familiarize others with a candidate's opinions and positions on issues.
3. Group dinners, if attended by an announced candidate in a currently contested election, must be "Dutch treat" - each participant pays their own share of the expenses, with the exception that societies and delegations may cover the expense for their own members. This rule would not disallow societies from paying for their own members or delegations gathering together with each individual or delegation paying their own expense. Gatherings of 4 or fewer delegates or alternates are exempt from this rule.

VI. Interview rules

Candidates and interviewers must comply with the following rules:

1. Groups wishing to conduct interviews must designate their interviewing coordinator and provide the individual's contact information to the Office of House of Delegates Affairs. The Speaker's Office will collect contact information for groups wishing to conduct interviews as well as for candidates and their campaign teams and will provide the information to both groups. Groups must indicate whether they wish to interview in-person or virtually and for which contest by the deadlines designated by the speaker.
2. Any formal questioning of an announced candidate, excluding a written questionnaire, is an interview and subject to the rules for interviews.
3. Interviews may be arranged between the parties once active campaigning is allowed.
4. Groups conducting interviews with candidates for a given office must offer an interview to all individuals that have officially announced their candidacy at the time the group's interview schedule is finalized.
 - a. A group may meet with a candidate who is a member of their group without interviewing other candidates for the same office.
 - b. Interviewing groups may, but are not required to, interview late announcing candidates. Should an interview be offered to a late candidate, all other announced candidates for the same office (even those previously interviewed) must be afforded the same opportunity and medium.
 - c. Any appearance by a candidate before an organized meeting of a caucus or delegation, other than their own, will be considered an interview and fall under the rules for interviews.

Election policy (continued)

5. Groups may elect to conduct interviews virtually or in-person.
6. In-person interviews may be conducted between Friday and Monday of the meeting at which elections will take place.
7. Virtual interviews are subject to the following constraints:
 - a. Interviews may be conducted only during a 4-7 day window designated by the Speaker beginning at least two weeks but not more than 4 weeks prior to the scheduled Opening Session of the House of Delegates meeting at which elections will take place.
 - b. Interviews conducted on weeknights must be scheduled between 5 pm and 10 pm or on weekends between 8 am and 10 pm based on the candidate's local time, unless another mutually acceptable time outside these hours is arranged.
 - c. Caucuses and delegations scheduling interviews for candidates within the parameters above must offer alternatives to those candidates who have conflicts with the scheduled time.
8. Recording of interviews is allowed only with the knowledge and consent of the candidate.
9. Interviews are recommended to be recorded with consent of all participating individuals and disseminated to the interviewing group members when all are not able to be present for the interview.
10. Recordings of interviews may be shared only among members of the group conducting the interview.
11. A candidate is free to decline any interview request.
12. In consultation with the Election Committee, the Speaker, or where the Speaker is in a contested election, the Vice Speaker, may issue special rules for interviews to address unexpected situations.
13. The Speakers are encouraged to continue recorded virtual interviews of announced candidates in contested races, to be posted on the AMA website.

VII. Campaign receptions

1. Our AMA will sponsor the AMA Candidate Reception which will be open to all candidates and all meeting attendees. Any candidate may elect to be "featured" at the AMA Candidate Reception. There will not be a receiving line at the AMA Candidate Reception. The rules regarding cash bars only at campaign receptions and limiting each candidate to be featured at a single reception will apply to the AMA Candidate Reception.
2. A state, specialty society, caucus, coalition, etc. may contribute to more than one party. However, a candidate may be featured at only one party, which includes: (a) being present in a receiving line, or (b) appearing by name or in a picture on a poster or notice in or outside of the party venue. At these events, alcohol may be served only on a cash or no-host bar basis.

VIII. Election process

1. At the Opening Session of the Annual Meeting, officer candidates in a contested election will give a two-minute self-nominating speech, with the order of speeches 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 their 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 of the House of Delegates will schedule a debate in front of the AMA-HOD to be conducted by rules established by the Speaker or, in the event of a conflict, the Vice Speaker.

Election policy (continued)

2. Nominating speeches for unopposed candidates for office, except for President-elect, will not be heard.
3. AMA elections will be held on Tuesday at each Annual Meeting.
4. Voting for all elected positions including runoffs will be conducted electronically during an Election Session to be arranged by the Speaker.
5. All delegates eligible to vote must be seated within the House at the time appointed to cast their electronic votes.
6. The final vote count of all secret ballots of the House of Delegates shall be made public and part of the official proceedings of the House.
7. The Speaker is encouraged to consider means to reduce the time spent during the HOD meeting on personal points by candidates after election results are announced, including collecting written personal points from candidates to be shared electronically with the House after the meeting or imposing time limits on such comments.

IX. Election Committee

1. In accordance with Bylaw 2.13.7, the Speaker shall appoint an Election Committee of 9 individuals for 1-year terms (maximum tenure of 4 consecutive terms and a lifetime maximum tenure of 8 terms) to report to the Speaker. These individuals would agree not to be directly involved in a campaign during their tenure and would be appointed from various regions, specialties, sections, and interest groups. The primary role of the committee would be to work with the Speakers to adjudicate any election complaint. Additional roles to be determined by the Speaker and could include monitoring election reforms, considering future campaign modifications and responding to requests from the Speaker for input on election issues that arise. The Speaker and Vice Speaker shall be full members of the Election Committee.

X. Campaign complaint reporting, validation and resolution process

1. Campaign violation complaints should be directed to the Speaker, the Vice Speaker, or the AMA General Counsel and should include the following details:
 - a. The name of the person(s) thought to have violated the rules
 - b. The date of the alleged violation and the location if relevant
 - c. The specific violation being alleged (i.e., the way the rules were violated)
 - d. The materials, if any, that violate the rules; original materials are preferred over copies. Where necessary, arrangements for collection of these materials will be made.
2. Campaign violation complaints will be investigated by the Election Committee or a subcommittee thereof with the option of including the Office of General Counsel or the Director of the House of Delegates.
 - a. The Committee will collectively determine whether a campaign violation has occurred. As part of the investigation process the Election Committee or its subcommittee shall inform the candidate of the complaint filed and give the candidate the opportunity to respond to the allegation.
 - b. If the complaint implicates a delegation or caucus, the Election Committee or its subcommittee shall inform the chair of the implicated delegation or caucus of the complaint filed and give the implicated delegation or caucus chair(s) the opportunity to answer to the allegation as a part of the investigative process.

- c. For validated complaints, the Committee will determine appropriate penalties, which may include an announcement of the violation by the Speaker to the House.
 - d. Committee members with a conflict of interest may participate in discussions but must recuse themselves from decisions regarding the merits of the complaint or penalties.
 - e. Deliberations of the Election Committee shall be confidential.
 - f. The Speaker shall include a summary of the Election Committee's activities in "Official Candidate Notifications" sent to the House, following each meeting at which an election was held. Details may be provided at the discretion of the Election Committee and must be provided when the penalty includes an announcement about the violator to the House.
3. A record of all complaints and the results of the validation and the resolution processes, including penalties, shall be maintained by the AMA Office of General Counsel and kept confidential.
4. The Election Committee will review the Campaign Complaint Reporting, Validation and Resolution Process as implemented and make further recommendations to the House as necessary.

President-elect (vote for one)

Bobby Mukkamala, MD

[AMA candidate web page](#)



The Michigan State Medical Society and its delegation to the AMA are excited to announce the candidacy of Bobby Mukkamala, MD, for president-elect of the American Medical Association. His candidacy is enthusiastically endorsed by the Great Lakes States Coalition and the Otolaryngology Section Council.

Dr. Mukkamala practices otolaryngology in his hometown of Flint, Mich., in an office he has shared for the past 24 years with his wife, Nita, an obstetrician-gynecologist.

Dr. Mukkamala has earned the confidence of his fellow physicians at all levels of organized medicine having served as president of his Genesee County Medical Society and Michigan State Medical Society.

At the AMA, Dr. Mukkamala served on CSAPH for eight years before being elected to the Board of Trustees in 2017 and 2021.

Dr. Mukkamala is a coalition builder and a strong voice for physicians in the ever changing and turbulent landscape of health care in America.

In his board liaison work he has been at the table of many of our sections to listen and offer guidance as their work was done.

Externally, over the past seven years, Dr. Mukkamala has served the association and the profession in many capacities from coast to coast. From congressional testimony to meetings with the executive branch in the White House, he has been a compelling voice to share with others the perspective of what it is like to care for our patients in this challenging climate.

Internally he has shared with multiple state and specialty societies the current focus areas of our AMA and our perspective on how to improve our ability to care for our patients. As chair of the AMA Substance Use and Pain Care Task Force, he has been a recognized voice as we try to change the trajectory of the opioid epidemic.

While he serves the AMA nationally, he remains engaged in his hometown of Flint. Serving on boards of several area nonprofits, Dr. Mukkamala is tireless in his work to improve the economic trajectory of his hometown, the future of its children, and especially the health of its citizens.

He and Nita have two adult children, Nikhil, a biomedical engineer, and Deven, a PhD candidate in political science.

He has an enormous sense of gratitude for his parents Apparao and Sumathi, both IMGs, and the country that welcomed them decades ago.

Personal statement

"I am forever grateful for the opportunity the AMA and our HOD have given me to become a leader within medicine. I have learned much and will be a life-long learner as I engage with physicians in an effort to improve health care in our country. I am ready to lead our AMA in a new role as its president-elect. The influences on health care are vast, and I am eager to make sure that physicians are always in the best position to improve the care of our patients. I humbly ask for your continued support and your vote to allow me to do so."

Speaker (vote for one)

Lisa Bohman Egbert, MD



The Ohio State Medical Association, its delegation to the AMA, and the Great Lakes States Coalition enthusiastically support the re-election of Lisa Bohman Egbert, MD, as speaker of the American Medical Association House of Delegates.

During her first term as speaker, Dr. Egbert has been working diligently towards the technical updates to our data processing systems happening through the HOD office and the presentation of the Resolutions Modification Task Force report at this meeting. She has enjoyed working with our new vice speaker, John Armstrong, MD, and looks forward to their ongoing partnership. A tireless advocate on behalf of our House of Delegates, Lisa's goal as speaker is to enhance our processes so that the policy we develop is well crafted and thoroughly vetted

while ensuring the minority voice is heard.

In addition to her duties as speaker and a member of our Board of Trustees, Lisa is privileged to serve on the AMA Foundation and COLA boards. She is a member of the Litigation Center Executive Committee, Council on Constitution and Bylaws, and the Election Committee. As speaker, she serves on the Election Task Force 2 and the Resolution Modification Task Force. She is a liaison to the International Medical Graduate Section governing council.

Lisa began her service to our AMA as a medical student when she was selected to serve as the student representative on the Women in Medicine Advisory Panel. Subsequently, she was elected to the Resident Physician and Young Physician Sections' Governing Councils, serving as chair of the YPS. She was also previously a member of the AMPAC board of directors and the Council on Medical Service. She credits these opportunities with her broad understanding of our AMA, which informs her service as a speaker and trustee.

Dr. Egbert's experience in organized medicine includes tenures as the president of the Ohio State Medical Association and the Montgomery County Medical Society. She remains an active member of both organizations and continues to advocate on behalf of her fellow physicians and trainees at the local and state levels.

Despite the ongoing challenges of maintaining a small independent practice, Dr. Egbert remains in solo practice as a general gynecologist. She is dedicated to preserving private practice as the consolidation in health care threatens this modality.

Lisa received her Bachelor of Science and Medical Doctorate from The Ohio State University. She is married to the "other" Dr. Egbert, Brad, who is an anesthesiologist. They have three children, David, Sarah, and Matthew. They recently welcomed Ashleigh, David's wife, to the family and are looking forward to Sarah and Matthew's weddings in the near future.

Personal statement

"From adjusting to a new parliamentary authority to working with the second election task force and the resolution modification task force, I am so excited to implement the many proposed improvements to our processes and looking forward towards those yet to come. It has truly been an honor to serve as your speaker this past year. Thank you for this AMAzing opportunity to serve our HOD!"

Vice speaker (vote for one)

John H. Armstrong, MD



The American College of Surgeons (ACS) and its delegation to our AMA are proud to sponsor John H. Armstrong, MD, for reelection as vice speaker of our AMA House of Delegates. John is endorsed enthusiastically by the Florida Medical Association, Southeastern Delegation to our AMA, and our AMA Specialty and Service Society.

As vice speaker, John has served with the speaker to facilitate the work of the Resolution Modernization Task Force, Election Task Force 2, and Election Committee. He is an ex officio member of the Council on Constitution and Bylaws and a liaison to the Academic Physicians Section, Organized Medical Staff Section, and the AMA Advisory Committee on LGBTQ Issues. John is adept at seeing multiple perspectives, a skill he has honed through his decades of leadership at all levels of our AMA: HOD Resident Physician alternate and delegate; Hospital (now Organized) Medical Staff delegate; Young Physician Section chair; HOD Army alternate delegate; Young Physician trustee; secretary; Surgical Caucus chair; ACS HOD delegation chair; House Compensation Committee chair; and member of our Council on Long Range Planning and Development.

John remains an active trauma surgeon, professor of surgery, and distinguished educator at the University of South Florida Morsani College of Medicine in Tampa; adjunct professor of surgery at the Uniformed Services University of the Health Sciences, Bethesda, Md.; member of the U.S. Defense Health Board; executive committee member of the ACS Committee on Trauma; and member of the ACS Academy of Master Surgeon Educators. His wife, Jodie, is an ophthalmologist in private practice.

John graduated from Princeton University with a degree in economics and the University of Virginia School of Medicine. He performed his surgical residency at Tripler Army Medical Center in Honolulu, his trauma fellowship at the University of Miami/Jackson Memorial Hospital, and his master educators in Medical Education Fellowship at the University of Florida. As an AMA nominee, he was elected to serve for six years on the ACGME Residency Review Committee for Surgery. John remains committed to protecting, promoting, and improving public health as he draws on his previous experience as Florida's surgeon general and secretary of health.

From the podium, John demonstrates inclusiveness, respect, and parliamentary skill. He remains a member of the American Institute of Parliamentarians. At the board table, John articulates the will of the House and emphasizes the importance of transforming AMA policy into action with results.

Personal statement

"As co-pilot with our Speaker, I remain grateful for the privilege to serve our House by first listening and then promoting inclusive, respectful, and efficient House deliberation. Serving on our AMA Board, I am mindful of the special role of your Speakers: we remain delegates of our House and are voices of, by, and for our House in the boardroom. My experience as your Vice Speaker for the first time last fall reinforced my view that together, we are stronger. I ask for your continued confidence and vote for reelection as your Vice Speaker."

Board of Trustees (vote for four)

David H. Aizuss, MD

[AMA candidate web page](#)



As the current secretary of the AMA Board of Trustees, David H. Aizuss, MD, is a proven and tireless advocate for patients and physicians as well as a respected leader. That is why the California Medical Association (CMA) and the AMA PacWest Conference resoundingly nominate him for re-election to the AMA Board of Trustees. Notably, Dr. Aizuss is also endorsed by the American College of Surgeons, the Section Council on Ophthalmology, and the Mobility Caucus.

Physician and patient advocacy have always been at the heart of Dr. Aizuss' career. As a medical student at Northwestern University, he emerged as a leader in the Illinois State Medical Society's Medical Student Section and served on the AMA-MSS Governing Council. His commitment to organized medicine continued in the

AMA-RFS, where he served on the AMA-RFS Governing Council for three years.

During pivotal health care system changes, Dr. Aizuss has been at the forefront, fighting for his colleagues, his patients, and the future of medicine. From winning high-profile battles on physician scope of practice in California to serious public health regulation on issues such as vaccines, mental health and gun violence, Dr. Aizuss has been a trusted expert and an insightful leader.

Always forward thinking, Dr. Aizuss has made the inclusion of young voices an important focus of his work in organized medicine. As president of the CMA, he was personally responsible for implementing a new organizational emphasis on diversity and inclusion. His guidance led CMA to significantly diversify the leadership on our councils and committees, as well as in our AMA delegation. In his words, "Nothing is more essential to the future of medicine than mentoring and promoting those eager and ready to serve our profession."

Dr. Aizuss has been married to his wife Felicia for 35 years, and they are the proud parents of two daughters. Having practiced in both Illinois and California and as a managing partner in a multispecialty ophthalmology group, Dr. Aizuss has deep clinical and practice management expertise in addition to his proven skills as an advocate and organizer. Please join all of his endorsing organizations in supporting Dr. David Aizuss for re-election to the AMA Board of Trustees.

Personal statement

"I've been privileged to work with the American and California Medical Associations through several pivotal moments for the practice of medicine over the last three decades. I believe that we are facing a critical point in history that will require us to rely on dedicated physician leaders of all generations and specialties, brilliant medical students, and an AMA nimble enough to navigate the challenges that we face. I am running for re-election to the AMA Board of Trustees because I know we can shape a better health care system for decades to come and that both member and nonmember physicians are looking to the AMA to ensure the future of our medical practice and access for our patients. I humbly ask for reaffirmation of your trust and vote so that we can work together to build a better future."

Board of Trustees (vote for four)

Melissa J. Garretson, MD

[AMA candidate web page](#)



The American Academy of Pediatrics proudly nominates Melissa J. Garretson, MD, for election to our AMA Board of Trustees. She is enthusiastically endorsed by the Texas Medical Association (TMA), the Section Council on Emergency Medicine, and our AMA Specialty and Service Society.

Dr. Garretson is a pediatric emergency physician in Fort Worth, Texas, who was previously in primary care private practice. She lives the burdens physicians face and sees the preventable consequences of delayed care. Melissa is committed to strong action to protect physician practices while promoting optimal, equitable patient health outcomes. She will bring a thoughtful, creative, practical voice to our Board.

Tackling tough issues, Dr. Garretson forges consensus on access to health care with particular expertise in Medicaid and CHIP. Pressing for payment reform, defending against the criminalization of medicine, fighting against scope expansion, and eliminating administrative hassles, Melissa also partners regularly with others to address public health, mental health, and health equity.

Dr. Garretson is an inclusive leader in our AMA with prior service on our BOT. As medical student trustee, Melissa helped ensure that the powerful voices of physicians were heard by Congress and the White House, especially during the contentious debates on the Clinton health reform plan. Her parliamentary experience as MSS vice speaker serves her well over 26 years of continuous service to our HOD, from her election as YPS delegate to her current tenure as chair of the AAP Delegation. Her service in multiple AMA roles led to reforms that strengthened the voice of our House.

Melissa's leadership experiences across three states have informed her understanding of federal and state politics. At Mayo, Melissa served as the medical student trustee for the Minnesota Medical Association, and at Duke as the first resident member of the North Carolina Medical Society PAC board. After entering practice in Texas, she served as county medical society president, represented her district on the TEXPAC board, and served her community on the board of the child advocacy center while raising twins with her husband, the president of a rural hospital.

Within TMA, Dr. Garretson is a trusted leader who gets things done. She advanced public health through private partnerships as chair of the Council on Health Promotion, and helped achieve liability reform, bringing thousands of new physicians to Texas. Melissa was instrumental in policy that led TMA to sue insurers over unfair payment, leading to \$2 billion in RICO settlements and the establishment of the multistate Physicians Foundation.

Dr. Garretson listens intently, balances divergent opinions, and finds solutions. With her previous Board experience and long tenure in our House, Melissa will be your advocate for action on our Board.

Personal statement

"Gridlock in Congress has blocked many of our reform efforts. Our AMA has untapped potential to improve our patients' health and our members' wellbeing. As your Trustee, I will help our Board forge strategic coalitions with both patients and industry, working across all branches of federal and state government and in the broader public to achieve real results from our advocacy."

Board of Trustees (vote for four)

Lynn Jeffers, MD, MBA

[AMA candidate web page](#)



A passionate advocate for patients and physicians, Lynn Jeffers is known for her ability to reach across specialty, geography and practice mode, to build consensus in the complex and rapidly evolving landscape of medicine.

Lynn's path in organized medicine began at the University of Michigan as the president of its AMA student chapter, leading to her election to the AMA-MSS Governing Council. It continued in the Resident and Young Physician sections and the Council on Medical Service, including as its past chair. Currently, she also heads the Section on Plastic Reconstructive and Maxillofacial Surgery and the American Society of Plastic Surgeons (ASPS) delegation.

While sharing an office with her husband, a large part of Lynn's solo practice is reconstructive breast surgery. She is especially proud of the multi-specialty Integrated Breast Center which she spearheaded and shepherded to national accreditation.

During the pandemic, as president of ASPS and acting chief medical officer of her two hospitals, she led the response teams for both. Under her leadership, ASPS and her hospitals acted proactively and effectively, with ASPS being recognized by the White House and the Surgeon General for helping source millions of masks to hospitals in multiple states, along with PPE and supplies to its members as they reopened after lockdown.

Lynn is a recognized leader of people, physicians, institutions, and organizations. Her 30-year work in organized medicine spans a variety of boards, councils, and officer positions at the county, state, and national level, both for her specialty and for the house of medicine. Lynn would now like to put her experience and expertise to work for us on our Board of Trustees and respectfully asks for your vote.

These last few years underscore the importance of physician leadership. In times of change and uncertainty, we seek those who can bring us together, put a greater purpose above their own, and can use their experience and skills to inspire action together. For her forward-thinking leadership rooted in a deep understanding of where we have been and where we need to go, the **American Society of Plastic Surgeons** and **PacWest Conference** proudly nominate **Lynn Jeffers for the AMA Board of Trustees**. Joining in their endorsement are:

Specialty and Service Society Caucus

Mobility Caucus

Cancer Caucus

Section Council on Plastic Reconstructive and Maxillofacial Surgery

American College of Surgeons

American Association of Plastic Surgeons

American Society of Aesthetic Plastic Surgery

California Society of Plastic Surgeons

Ventura County Medical Association

Personal statement

"As the daughter of a retired physician, wife of an orthopaedic surgeon, and mother of a fourth-year medical student, the future of medicine is very personal to me, and I am committed to improving and sustaining the medical profession for current and future physicians."

Board of Trustees (vote for four)

Ilse Levin, DO, MPH&TM

[AMA candidate web page](#)



Following her election to the AMA Board of Trustees at the onset of the Covid19 pandemic, Dr. Ilse Levin, a board-certified internist and epidemiologist working on the front lines as a hospital based physician, provided firsthand knowledge of the evolving pandemic and educated the public through AMA podcasts and public outreach. In a world in which misinformation and disinformation were a constant threat to public safety, she worked to keep the AMA a trusted source of science and medicine.

Ilse has sought to increase membership outreach, especially among groups that are not traditionally active in our AMA. As the first osteopathic physician elected to the AMA Board of Trustees, she has worked to strengthen the relationship with the American Osteopathic Association; founded the Osteopathic Physician Caucus at the AMA; and has visited a third of the osteopathic medical schools in the U.S., speaking to deans, faculty, and thousands of medical students, resulting in significant increases in their membership to the AMA.

Her other Board responsibilities included Board liaison to the Council on Legislation, the Council on Long Range Planning and Development, the Integrated Physician Practice Section, the Academic Physicians Section, the Minority Affairs Section, and the Women Physicians Section. Additionally, Ilse was selected to serve as our AMA representative to the Medical Societies Consortium on Climate and Health, currently serving on their executive committee.

Ilse is honored to be nominated for re-election to our AMA Board of Trustees by the American Society of Addiction Medicine. She is also extremely grateful to be endorsed by the American College of Physicians, the Specialty Services Section (SSS), the Section Council on Preventive Medicine, the Pain and Palliative Section Council, the Maryland State Medical Society, and the Southeastern Delegation to the AMA.

Ilse has been active on the Board in fighting for payment reform, with the AMA recently seeing significant improvements in prior authorization rules. As a member of the Board, she will continue to advocate strongly for Medicare payment reform, oppose the criminalization of the practice of medicine, and work to expand graduate medical education, all with the goal to improve access to care.

Dr. Ilse Levin has enjoyed the opportunity to serve the AMA, and respectfully asks for your vote for re-election to the Board of Trustees.

Personal statement

"Medicine is not only a wonderful profession but a critical mindset. We go about each day providing the best care to our patients while we continue to battle disinformation, the criminalization of the practice of medicine, and the threats that affordability poses to access to care."

Board of Trustees (vote for four)

Thomas J. Madejski, MD

[AMA candidate web page](#)



The Medical Society of the State of New York is proud to sponsor Tom Madejski, MD, for re-election to the AMA Board of Trustees. His candidacy is endorsed by the American College of Physicians.

"I'm thankful and humbled to have been given the opportunity to serve our AMA House of Delegates on the Board of Trustees these last four years. My active involvement in the AMA began when I established my solo practice in upstate New York over 30 years ago. MSSNY, the ACP, and our AMA helped me expand our rural practice and helped me deal with the challenges interfering with my ability to get the best care for my patients. They also helped me develop my advocacy and leadership skills and gave me a wide range of experience: my earliest days dealt with HIV policy advocating for testing and destigmatization of patients. I've negotiated with legislators on crafting public option financing in New York state and continue to use that experience in discussions with other legislators—always informed by AMA policy. I created a regional consortium of states to work on messaging and advocating together at the State and Federal levels. I continue to work to expand and amplify our AMA advocacy efforts. During the pandemic I worked to help our physicians implement telemedicine and get PPE for their practices.

"I've learned much from my time in the House and from my service on Council on Medical Service and have used that experience during my time on our AMA BOT. We work as a team on the board. I've been honored to contribute to our work on telemedicine, IT, expanding advocacy, and many other areas of strategic review and oversight. I'm particularly proud of our work for Truth, Science and Equity."

Tom is an active member of the BOT. He is past chair of the Awards and Nominations Committee and has served on the Finance, Audit, and Governance committees. He represents our AMA as a board member of the American Medical Association Foundation and the Council on Laboratory Accreditation.

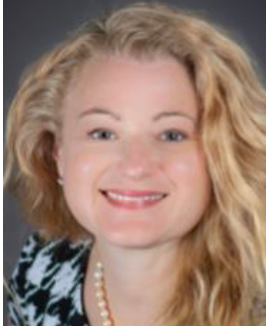
Board certified in internal medicine, hospice and palliative care, Tom has cared for many of his geriatric patients for over 30 years. He has been a staunch advocate for the physician-led health care team, and freedom from third party intrusion on the patient physician relationship.

Throughout his four years on the BOT, Tom has demonstrated strong leadership on key issues, including telemedicine, IT, advocacy, and truth, science and equity. His vision for the critical challenges the AMA faces going forward include strengthening the federation of medicine to enhance our ability to advocate effectively at the state and federal levels; further engaging our patients to ensure the AMA is their trusted ally for truth, science, and reformation of a health care system with access and quality care available to every individual; and maintaining a laser focus on enhancing our patient relationships during a time of unprecedented change in technology and care delivery.

Board of Trustees (vote for four)

Shannon Pryor, MD

[AMA candidate web page](#)



MedChi, The Maryland State Medical Society, and the Maryland Delegation to the AMA are proud to nominate Shannon Pryor, MD, for election to our AMA Board of Trustees. She is enthusiastically endorsed by the Medical Society of DC, the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS), the Section Council on Otolaryngology, and the Southeastern Delegation to the AMA.

A board-certified practicing otolaryngologist, Shannon has enjoyed over three decades of service as a leader and consensus builder within our AMA and organized medicine at all levels. She has been a tireless and vocal advocate for physicians, medical students, and patients. Through extensive experience with strategic planning, operations, and finance, she brings unique skills in organizational effectiveness and governance that will benefit the work of our AMA Board of Trustees.

Having attended her first AMA meeting as a first-year medical student, Dr. Pryor was first elected to our House of Delegates in 1995 and has represented both state and specialty societies. As member and past chair of CLRPD and past chair of reference committee F, Shannon has developed a deep understanding of our AMA and the federation of medicine. She served as the first chair of the AMA Women Physicians Section and cofounder of the Women in Otolaryngology Section of the AAO-HNS. In both roles, she led teams that created group visions as well as operating and governance structures. As president of MedChi during the COVID pandemic, she optimized initiatives to protect physician practices and public health, ensuring effective communication with, and responsiveness to, members. She has served on the Board of Directors and Board of Governors of the AAO-HNS, with additional AAO-HNS roles in legislative affairs, ethics, workforce planning, and equity/inclusion. After curricular work in communication, motivation, and negotiation, Dr. Pryor earned certification as a life coach in 2021. Her current charitable service includes roles as treasurer of the Center for a Healthy Maryland and secretary-treasurer of the National Capital Physicians Foundation.

Shannon holds a BA from Williams College and an MD from Tulane. She completed her residency in otolaryngology-head and neck surgery at Johns Hopkins and fellowship at the National Institutes of Health, where she was elected by her peers as clinical co-chair of the NIH fellows committee. She has practiced with MedStar Georgetown University Hospital since 2014. Her prior experience in private practice, HMO, and federal employment has provided understanding of the needs of physicians in different practice modes and the importance of each physician's right to choose his or her practice setting.

Personal statement

"I respect the wisdom, creativity, and innovative spirit of our AMA House of Delegates. Every challenge presents an opportunity for transformation, improvement, and action. We have many opportunities. It is a joy to work with and learn from you, my colleagues. Acting together, we will secure the future of our profession. As your trustee, I pledge to listen, communicate, collaborate, and advocate on behalf of the House of Medicine. I am ready to get to work on our board, and I humbly ask for your vote."

Board of Trustees (vote for four)

David Welsh, MD, MBA

[AMA candidate web page](#)



I am grateful and humbled to be nominated by the Indiana State Medical Association (ISMA) for the position of trustee on our AMA Board. I am honored to be endorsed by the Great Lakes States Coalition, the American College of Surgeons and the American Association of Public Health Physicians.

My journey to become a physician and surgeon began at the University of Notre Dame, followed by the Indiana University School of Medicine. I trained in general surgery at Good Samaritan Hospital in Cincinnati, with rotations at University of Maryland Shock Trauma and Cincinnati Children's Hospital. My public health training is ongoing and "on the job" with more than three decades as a rural county health officer. I also earned my MBA at Miller School of Business at Ball State University. Lifelong learning is my passion and pathway to success.

Organized medicine is at the core of what drives me and gives me professional satisfaction. I have decades of experience building health policy by carefully listening to stakeholders, most especially fellow physicians. This approach has delivered concrete benefits across a wide range of local and national health care challenges, including expanded access to mental health care; improved delivery of public health services; preservation of Indiana's Medical Malpractice Act; improved maternal and infant health; successful efforts to combat drug shortages; promotion of injury reduction; expansion of trauma care in Indiana; reduced violence in the health care workplace; decreased ergonomic injuries; and progress against the chronic challenges of homelessness and substance use disorder.

I have served in positions including Ripley County Medical Society president, ISMA District 4 president, ISMA alternate trustee, ISMA trustee, ISMA Board of Trustees chair, ISMA president, and involvement in ISMA's political action committee and Commission on Legislation.

Nationally, I have served the AMA as chair of CSAPH and Hospital PTAC at TJC, and as a member of the AMA Ambassador Steering Committee and Foundation Committee.

I have gained experience and training at the American College of Surgeons on the Board of Governors and Board of Regents.

With decades of experience in rural medicine, I've navigated the unique challenges that physicians and patients face. My overarching passion is to ensure that physicians everywhere have the support and tools they need to excel in patient care, regardless of location. By uniting stakeholders, we can leverage our collective voice and enhance the work of physicians. As a candidate for the AMA Board of Trustees, I'm dedicated to working with the HOD to promote policies that have a positive impact on physicians and their patients nationwide. My vision is to create a health care landscape where every physician is empowered to deliver exemplary care to all patients.

Personal statement

"My professional mission is to help physicians care for their patients by creating the tools needed to bring stakeholders together and improve physicians' work environment. Strong, motivated leadership from our AMA is critical to provide the best pathway for success for our physicians and their patients."

Council on Constitution and Bylaws (vote for one)

Christopher E. Gribbin, MD

[AMA candidate web page](#)



Last June, a potentially open seat on the Council on Constitution and Bylaws did not come about, and Dr. Gribbin withdrew his candidacy.

This June there is, indeed, an open seat on the Council on Constitution and Bylaws and an opportunity for Dr. Gribbin to again present his credentials and demonstrate his commitment to serve.

CREDENTIALS include being the current speaker of the Medical Society of New Jersey House of Delegates, a MSNJ presidential year that focused on rewriting their bylaws to streamline the society's structure and two years as president of the medical staff of Saint Peter's University Hospital where he chaired the complete rewriting of their bylaws. He is a member of the American Institute of Parliamentarians and is studying to become a registered parliamentarian. These experiences have given him a real understanding of and passion for the value that good bylaws play in the success of an organization in service to its members.

A graduate of Cornell University Medical College, Dr. Gribbin completed his residency in radiology and fellowship in interventional radiology at New York University Medical Center. He left to join University Radiology Group in New Jersey, a large, 100 percent physician-owned practice providing service at multiple hospitals and imaging centers, where he chairs interventional radiology at St. Peter's. His commitment to bring all participants in the health care equation together includes study at the New Jersey Healthcare Leadership Academy of Seton Hall University, of which he is a fellow.

COMMITMENT to our House of Delegates in helping CC&B protect the voice of our House and preserve the rights of delegates in setting AMA policy.

Whether in the hospital or medical society setting, Chris is a fierce advocate for physician voice and physician control in setting sound health care policy that works for all. His impassioned testimony for physician control of medical practices is well known locally, in New Jersey, and in our House of Delegates. Now he would like to join the council to help ensure that CC&B does its job putting in place policy that protects our democratic process and best serves our practicing physicians.

Chris appreciates that again, the Medical Society of New Jersey—joined by the American College of Radiology, the Society of Interventional Radiology, the AMA Radiology Section Council, and the Southeastern Delegation to the AMA—has nominated him and he respectfully asks for your vote for the open seat on CC&B.

Personal statement

"To an outsider our House must seem a shambolic democracy ... chaotic, messy and even downright maddening at times. But that's the nature and the strength of our democratic process. There is a method to our madness and its bedrock is our Council on Constitution and Bylaws. I am proud of how in our House we leverage diversity of thought to formulate policy to best serve our patients and our profession."

Council on Constitution and Bylaws (vote for one)

John W. Spurlock, MD

[AMA candidate web page](#)



John W. Spurlock, MD, FACOG, a distinguished member of the American Medical Association since 1985, is running for the Council on Constitution and Bylaws and endorsed by the Pennsylvania Medical Society. With a remarkable record of dedication and service, Dr. Spurlock has attended 75 consecutive AMA meetings, demonstrating his steadfast commitment to the AMA and its ideals. In recognition of his outstanding advocacy for the AMA, Dr. Spurlock was recently awarded as an association's membership recruitment awardee. This prestigious honor is a testament to his dedication to promoting the AMA's mission and vision.

John lives on a 31-acre farm in Quakertown Pennsylvania with his wife Lisa, his son John and daughter-in-law Angela, and his three grandchildren, John, Nicholas, and Louisa.

Dr. Spurlock's extensive experience in medical leadership positions makes him a strong candidate for this important role. He began his work with the AMA as the U.S. Army delegate to the HOD for the Resident Physician Section in 1985. Since then, Dr. Spurlock has served state and section delegations, including serving as a teller for multiple meetings. Additionally, he has been a valuable member of the OMSS Governing Council, serving as former secretary, former vice chair, and current chair. Dr. Spurlock is a strong believer in the importance of upholding the AMA's constitution and bylaws, which serve as the foundation for its governance. A parliamentarian since 2003, Dr. Spurlock would work diligently to ensure that the bylaws remain relevant and effective in guiding the AMA into the future as a member of the Council on Constitution and Bylaws.

"I have been a member of the National Association of Parliamentarians for over 20 years. I have been the vice speaker of New Jersey and Pennsylvania. I have had considerable experience running medical meetings both as a speaker and Chair of the Governing Council of the AMA's Organized Medical Section (OMSS). I also had the privilege of Chairing the Reference Committee on Constitution and Bylaws at a past AMA meeting. Through all of these parliamentary activities I have come to understand the importance of an organization's Bylaws. During my tenure on the OMSS Governing council I had the privilege of crafting a set of 'Medical Staff Model Bylaws' for any physician organization. With the support of my family and the Pennsylvania Medical Society I would like to bring my parliamentary experience to the Council on Constitution and Bylaws."

AMERICAN MEDICAL ASSOCIATION: Resident Physicians Section, U.S. Army delegate to the House of Delegates, 1985–1988; Young Physicians Section, U.S. Army alternate delegate, 1988–1990; U.S. Army delegate, 1990–1992; Young Physicians Section, delegate from Medical Society of New Jersey, 1992–1997; alternate delegate, Medical Society of New Jersey, 1993–2001; AMA Federation Coordination Team, 1996–1999; delegate, June 1996, December 1996; teller, December 1996, June 2004; delegate for St. Luke's Hospital medical staff to OMSS, 2000–present; alternate delegate, Pennsylvania Medical Society, 2002–2008; delegate, Pennsylvania Medical Society, 2008–present; AMA, OMSS, Pennsylvania state chair, 2009–present; AMA, OMSS Governing Council, chair, 2020–present.

Council on Medical Education (vote for one)

Seema Sidhu, MD

[AMA candidate web page](#)



The California Medical Association and PacWest Conference are proud to endorse the candidacy of Seema Sidhu, MD, FACOG, FHPM, for election to the AMA Council on Medical Education (CME).

As a practicing obstetrician and gynecologist, Dr. Sidhu has decades of proven leadership in medical education. As the medical school representative on the student board of governors, she passionately advocated for medical student wellbeing and training equity. During residency, she was a strong advocate as the resident representative on the IGMEC helping develop and implement policies and protocols to improve the training environment. Her commitment to medical education continued as she became a clinical faculty for University of California San Francisco and a clinical assistant professor for Drexel University College of Medicine.

Dr. Sidhu is currently the associate dean for Drexel University College of Medicine Bay Area Campus as well as the Kaiser Permanente assistant physician-in-chief for physician development and medical education. In her education roles, she oversees professional development, physician wellness, mentoring, peer support and medical education for 800+ learners and physicians. She established the Office of Medical Education, a department dedicated to improving training experiences and advancing education for medical students, residents, fellows, and faculty.

Dr Sidhu graduated from Creighton University medical school in Omaha, Neb., and completed her residency in obstetrics and gynecology at Kapiolani Women and Children Hospital in Hawaii, serving the underserved population and educating the community about women's health.

With over 18 years of experience in organized medicine, Dr. Sidhu has served on multiple committees and leadership roles at both the state and national levels. She has served in the AMA House of Delegates as a California delegate and chair of PacWest Reference Committee C. She also serves as a member of the AMA Foundation's programs committee. As a Trustee on the California Medical Association Board of Trustees, she has been actively involved in protecting physician and patient's rights through scope of practice initiatives and improving access to care.

Dr. Sidhu is deeply committed to her trainees, patients, and our profession. As a fierce advocate, she will make changes and promote the community physician voice on the Council of Medical Education.

Personal statement

"I am a strong advocate for organized medicine, advancing medical education and wellness for physicians, students, residents, fellows. My commitment to medical education is driven by my personal experiences in medical school and residency training as an immigrant and a young mother. I will leverage my leadership skills in addressing medical education debt, focusing on wellness and bringing about systemic changes to mitigate burnout, preserving reproductive rights for all, ensuring equity and diversity in medical education and selection processes. As an active clinician and educator serving our patient communities, I am grateful for the opportunity to advocate on behalf of our physicians, fellows, residents, and students and develop strong AMA policies in medical education."

Council on Medical Service (vote for three)

Christine Bishof, MD, MPH

[AMA candidate web page](#)



The Illinois State Medical Society is proud to present Christine Bishof, MD, MPH, FACEP, for election to the AMA Council on Medical Service (CMS). She is additionally endorsed by the Great Lakes States Coalition and the American College of Emergency Physicians.

Dr. Bishof is an emergency medicine specialist whose 15-year career spans a wide variety of practice settings, including large urban trauma centers, suburban community hospitals, and small critical access hospitals. She is a partner in a large democratic physician medical group and works on their travel team. Her unique work arrangement gives her the opportunity to practice medicine in Illinois, Indiana and Michigan, providing her with a unique perspective on the different challenges facing physicians and patients in different payer and care delivery environments. Dr. Bishof also maintains other part-time positions, including that of teaching attending at Chicago's largest public hospital where she completed her residency and served as chief. She is honored to work with students and residents while caring for some of the most vulnerable patients, including a large migrant population.

As an AMA member of more than two decades, Dr. Bishof has served as an Illinois State Medical Society delegate to the AMA since 2020 and is currently vice chair of the delegation. She has also been an alternate delegate and was active in the AMA Medical Student Section, Resident and Fellow Section, and Young Physician Section. She has also served as a representative to the AMA Scope of Practice Partnership since 2016.

Additionally, Dr. Bishof brings deep leadership experience from her work with the Illinois State Medical Society. She served as speaker from 2021 to 2023 and vice speaker from 2019 to 2021. She has served on numerous councils and committees, including the Council on Economics and the Council on Medical Service (including as chair from 2012 to 2017). Dr. Bishof has served on the Board and as chair of the Council of the Chicago Medical Society. Her passion for organized medicine and her unique work experience gives her a solid foundation for collaborating with physicians across medical specialties and geographies to work toward a common goal of healthcare system reform.

Dr. Bishof believes that the AMA is the most effective voice representing all physicians and she would be honored to join the Council on Medical Service's efforts to create positive change that will benefit both patients and the physicians who serve them.

Personal statement

"As a member of the AMA Council on Medical Service, I will continue to tackle some of the biggest challenges faced by the House of Medicine. As it currently exists, the American health care system does not serve physicians, and it certainly does not serve patients. It is designed to fund as little care as possible, and the only winners are the insurance companies and large health care systems. The only way to turn this around is to get physicians back in charge."

Council on Medical Service (vote for three)

Steven Chen, MD, MBA

[AMA candidate web page](#)



In seeking re-election to the Council on Medical Service, Steve pledges to bring the same commitment and enthusiasm to CMS that he brought in 1996 when he was appointed to its medical student position and later in the resident and fellow position and now in his current term.

He knows that advocating for patients and our profession is a core part of the CMS mission in identifying problems and setting up the policy guideposts and guardrails that allow us to have a viable practice and truly be there for our patients.

The strength that Steve brings to CMS is that he has sat in many different chairs around the health policy table: from his academic research in health economics, to associate program director of a surgical oncology fellowship, to research director, to employed physician to solo practice. He knows from personal experience the joys and pitfalls of each and how health policy affects each of these practice modes.

Steve is well-known in our House from his years of involvement in the MSS, RFS, and YPS, including six years on the YPS Governing Council, and as the current immediate past chair of the Specialty and Service Society Caucus. In these roles he has worked hard to find ways to build consensus and weigh interests from all specialties and geographies. Within his own specialty, he is the chair of the Surgical Caucus, and a past-president of the American Society of Breast Surgeons, while serving as its delegate in our House.

Being well-versed on the issues coming before CMS is an asset but for Steve it's the health policy principles that are the bedrock of American medicine ... the foundation on which those of us practicing on the frontlines must rely effectively to serve our patients, advance our profession and promote the public health.

Having actively contributed to over 150 CMS reports, he knows how to take into account differing viewpoints, find the gaps in policy, and why the Council must deliver to our House action-ready reports that work for all of medicine.

The American Society of Breast Surgeons and PacWest Conference are proud to nominate Steven Chen, MD, for re-election to CMS, joined by endorsements from the American College of Surgeons, Association of Clinical Oncology (ASCO), Specialty and Service Society (SSS) Caucus and the Cancer Caucus.

Experienced and eager to continue contributing to the work of CMS, Steve, respectfully, asks for your vote for his re-election.

Personal statement

"Protecting our patients and medicine as a profession involves all physicians holding ourselves to a standard that patients and the public can trust in our good intentions. We must continue to fight for the ability of physicians to head the team, not only in caring for our patients, but also our communities."

Council on Medical Service (vote for three)

Erick A. Eiting, MD, MPH, MMM

[AMA candidate web page](#)



The American College of Emergency Physicians and the Section Council on Emergency Medicine proudly nominate Erick A. Eiting, MD, MPH, MMM, for re-election to the AMA Council on Medical Service for a second term.

An experienced leader, Dr. Eiting has a demonstrated track record of success in health care operations, delivery, and health policy. He is currently vice chair of operations in the Department of Emergency Medicine for the Icahn School of Medicine at Mount Sinai in New York City. On a daily basis, Dr. Eiting is an active health system leader, overseeing clinical operations, patient safety and quality, physician recruitment, billing, revenue cycle and advanced practice provider supervision for a large emergency department and urgent care center in Manhattan. Previously, Dr. Eiting served as medical director of USC Correctional Health, where he created a program to expand access to care for incarcerated patients in Los Angeles County, Calif. With his tireless initiative, he led the creation of an on-site urgent care and specialty clinics, expanded care coordination, and streamlined specialty referrals through an eConsult portal. Through his leadership, these efforts reduced unnecessary emergency department visits, decreased wait times for specialty referral appointments, and reduced health care costs for the public health system.

Throughout his career and training, Dr. Eiting has worked passionately on improving access and care for vulnerable patient populations, diversity and inclusion, and health equity. After graduating college, he worked as an AmeriCorps volunteer with a focus on increasing HIV testing and improving outcomes for patients with HIV in socioeconomically disadvantaged neighborhoods throughout Brooklyn. He currently serves as medical director for quality for the Center for Transgender Medicine and Surgery at Mount Sinai.

Dr. Eiting has been an engaged member of organized medicine on every level. He completed his term as president of New York County Medical Society in June, and also served as co-chair for the Committee on Health Equity for the Medical Society of the State of New York for four years. He served on the AMA Council on Medical Service as a resident physician, as well as the AMA-Resident & Fellow Section Governing Council, the AMA Advisory Committee on LGBTQ Issues, and the AMA Health Equity Task Force.

Originally from Wisconsin, Dr. Eiting graduated from the University of Wisconsin in Madison. He speaks Spanish fluently and has lived in Mexico, Spain and Peru.

Personal statement

"We have reached a critical moment in healthcare. Labor and practice expense costs have skyrocketed since the pandemic. At the same time, physicians were once again asked to take a pay cut, as we watched Medicare rates get slashed again at the beginning of this year. We are seeing our patients with Medicaid losing their insurance following the public health emergency, leaving them vulnerable and without access to vital healthcare. We, the physician community, need to stand up and take action. We serve a critical role in keeping patients healthy. It is only right that we should be paid fairly for our efforts so that we can continue to serve the patients who need us."

"The time I have spent serving on this Council has been incredibly exciting and rewarding. I humbly ask for your support and your vote for the AMA Council on Medical Service."

Council on Medical Service (vote for three)

Ezequiel “Zeke” Silva III, MD

[AMA candidate web page](#)



Dr. Ezequiel “Zeke” Silva III, an interventional radiologist in San Antonio, serves locally as the Bexar County Medical Society president, helping physicians with the daily challenges of practicing medicine. He was honored as a 2021 Health Care Hero by the *San Antonio Business Journal*.

Dr. Silva serves organized medicine at the state and national levels. He is a member of the Texas Medical Association’s Delegation to the American Medical Association. He also serves on TMA’s Council on Legislation and is a past member of TMA’s Council on Socioeconomics. He chairs the AMA/Specialty Society RVS Update Committee (RUC) and is a founding member and immediate past co-chair of the AMA Digital Medicine Payment Advisory Group (DMPAG).

Dr. Silva has held multiple leadership positions in his specialty, including as a founding member of the Harvey L. Neiman Health Policy Institute; chair of the American College of Radiology Commission on Economics; economics chair of the Society of Interventional Radiology; and president of the Texas Radiological Society. He is on the South Texas Radiology Group board and is the vice-chief of staff and director of radiology at Methodist Hospital Texsan. He is an adjunct professor at the UT Health San Antonio Long School of Medicine.

He completed medical school and residency at Baylor College of Medicine in Texas and a vascular and interventional radiology fellowship at Massachusetts General Hospital.

Payment Leadership. Physicians know what is required to provide the best care possible. Physicians understand how payments affect quality and access to care. Dr. Silva has spent his career advancing the physician’s voice in payment determination, culminating in his current position as the AMA RUC chair. He leads 32 RUC members and over 300 advisory committee members representing almost every specialty in AMA’s House of Delegates (HOD). The RUC’s focus is essential: Patients deserve the best possible care from their physicians, a philosophy he wishes to bring to the council.

Innovation Advocate. Physicians must help mold the role of new technology, including digital medicine, in patient care. As a founding member and immediate past co-chair of the AMA DMPAG, Dr. Silva has advocated for responsible, physician-informed diffusion of technology to improve patient care. Success, however, requires physician involvement to answer questions such as: Does it work? Will I get paid? Will I get sued? Will it work in my practice?

Personal statement

“I am running for the Council on Medical Service (CMS) to ensure AMA remains a strong voice for physicians. A key role of the CMS is translating physician and patient needs into meaningful reports, actions, and recommendations to the HOD, AMA leadership, and the public. National policy is only as effective as the local physician’s experience that informs our actions. To that end, I am proud to serve as president of my local county medical society, where I work side-by-side with my colleagues to advance health care. I’ll do the same on the national level when elected to serve on the CMS. I will do everything in my power to strengthen our AMA as the voice for all physicians.”

Nari Heshmati, MD, MBA

[AMA candidate web page](#)



The Washington State Medical Association proudly nominates Nari Heshmati, MD, MBA, FACOG, for election to our AMA Council on Science and Public Health. His nomination is enthusiastically endorsed by the American College of Obstetricians and Gynecologists and PacWest.

Nari has been an AMA member since 2001 but his journey to medicine started far earlier. He comes from a medical family, including: his father, an orthopedic surgeon and public health director; his brother, a family physician; an uncle who is an OBGYN; and an uncle who is a hematologist-oncologist. At the age of 10, he had his first health care job when his father paid him to set up electronic insurance billing. Having these first-hand experiences early on solidified his commitment to

public health service.

Nari's father instilled in him that we have an obligation to improve our communities and that access to health care is a right for all. Nari was part of the founding medical school class of Florida State University and served as president of his class. While in medical school, he joined the Florida Medical Association, taking on leadership roles in strategic planning and political action, spending a month embedded with FMA lobbyists at the state capital as a Gerold Schiebler Legislative Intern working on tort reform initiatives.

He went on to do his residency in OBGYN at Vanderbilt University, remaining active with the AMA as a delegate to the Resident Fellow Section. Following residency, he joined The Everett Clinic in Washington State—a large physician-owned multispecialty group practice—where he has served in numerous leadership roles while continuing to provide direct patient care.

Nari is currently president of the Washington State Medical Association, past chair of the Washington Medical Political Action Committee, and past chair of the WA Section of the American College of OBGYNs. He is deeply engaged in advocating for physicians and patients, and routinely meets with elected officials and provides feedback on public health policy. During the pandemic, he helped coordinate the state's response as part of the Washington State Stay Open Stay Safe Workgroup and later was appointed by Gov. Jay Inslee to the Pandemic After Action Review Taskforce to help develop a playbook for future public health emergencies. He speaks regionally and nationally including presentations at State of Reform, American Medical Group Association, Beckers, and America's Physician Groups.

Nari believes in supporting his community and is active as a board member of the Washington March of Dimes. His involvement with the nonprofit group, which fights for the health of all moms and babies, started after his own son was born prematurely and spent time in the NICU. He has chaired the March for Babies Walk in Snohomish County and co-chaired the Washington March of Dimes Gala with his wife, Kathryne.

Personal statement

"I've spent my entire career passionately advocating for physicians and our patients. The pandemic challenged our healthcare system and strained the public trust in our medical expertise. With your support, I want to work with the AMA on CSAPH to ensure the highest level of care guided by the best scientific evidence is available for everyone."

Raymond Tu, MD, MS

[AMA candidate web page](#)



Proudly wearing “policy wonk” as a badge of honor, Raymond Tu, MD, MS, FACR, brings more than 38 years of experience and expertise in public health to his candidacy to serve on the Council on Science and Public Health.

Most recently Dr. Tu served as the chief medical officer of MedStar Family Choice DC Medicaid plan serving more than 70,000 Medicaid patients where Ray:

- Opposed scope of practice creep
- Supported prior authorization reform
- Supported coverage of respite care and specialty medication
- Chaired DCs lead toxicity collaborative
- Served on the perinatal mental health task force

During his tenure as CMO of the District’s only safety net hospital Ray successfully:

- Advocated funding to keep D.C.s safety-net hospital open
- Lead an effective infection and quality control team
- Lead his hospital’s COVID alternate care site expansion
- Lead his hospital’s successful conversion from analog to digital mammography, and first-time complete ACR accreditation

The governor of Maryland and the District of Columbia City Council have recognized Dr. Tu for his leadership in the advancement of public health and health care of the underserved.

As a faculty member of the Uniformed Services University and The George Washington University, Dr. Tu has taught and mentored generations of medical students, residents, and fellows. His interest in population health and equity began as a resident at the University of Wisconsin when he hosted a 3 a.m. TV show, Wellness with Ray Tu and grew into decades of service for the community.

Dr. Tu has been a leader at the AMA as both an alternate and delegate for the Medical Society of the District of Columbia. He used this opportunity to serve on several reference committees. For years he has served as specialty society advisor to our AMA’s CPT, RBRVS (the RUC) where he aided crafting CPT codes, and RVU valuation of the care we provide.

As Medical Society of the District of Columbia president, and chair of the Public Health Committee, Dr. Tu has been the spokesperson for doctors and patients of D.C. receiving several awards and accolades.

Dr. Tu has experience in solo practice, hospital administration as chief of staff, chief medical officer, and health plan chief medical officer. As a practicing physician, he understands how public health integrates in the delivery of healthcare in physician offices.

Raymond Tu, MD, is a tireless advocate for public health care of the most fragile patients as well as being a leader for the entire health care sector. Public health is very personal to Ray. He knows firsthand the challenges our seniors face to accessing health care as the son and caregiver of his mom with advanced dementia.

Endorsed by the Medical Society of the District of Columbia, Maryland State Medical Society, Radiology Section Council and the Southeast Delegation to the AMA, Ray, respectfully, asks for your vote to serve on the Council on Science and Public Health.

Personal statement

“Providing care for our vulnerable is a test of our profession. Equity is like providing a pair of shoes . . . not just any pair but a pair that fits. Physicians are best trained and equipped to fill those shoes.”