Introduction

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 2022, along with a description of our AMA election process and the current rules governing the conduct of campaigns.

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

AMA House of Delegates policy requires that each candidate’s conflict-of-interest information be available for review. You can find this information posted on our password-protected web page. We trust you will find this manual user-friendly and robust, but suggestions for future editions are welcome; just send your comments to hod@ama-assn.org. Nominations will be accepted at the Opening Session of the House of Delegates. Elections for all contested races will be held Tuesday morning, June 14, during the Election Session at 8 a.m.

Sincerely,

Bruce A. Scott, MD
Speaker

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

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

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 that may open as a result of the election of any announced candidate. Additional notices will also be sent out following the April Board meeting and on “Official Announcement Dates” to be established by the speaker. (G-610.020(3))

This rule provides a standard mechanism by which individuals can make known their intention to seek office, including positions that are contingent on prior election results. Printed announcements may not be distributed at an AMA-HOD meeting under any circumstance.

Endorsements
Any communication or activity undertaken to seek endorsement from groups of which the candidate is not a current member after the announcement of candidacy and prior to the April Board meeting (i.e., active campaign period) would be considered active campaigning and, therefore, a violation of the election rules. Any formal questioning of an announced candidate, including written questions, would be considered an interview, and, therefore, subject to the rules for interviews. (See below.)

Nominations
The AMA-BOT solicits nominations for four elected councils: the AMA Council on Constitution and Bylaws, the AMA Council on Medical Education, the AMA Council on Medical Service, and the AMA Council on Science and Public Health. A deadline for receipt of information to be included in this election manual is determined each year, and the AMA-BOT announces council candidates after its April meeting. Council candidates who have announced their intent to seek election, including those seeking re-election, must submit the necessary nomination materials to the AMA-BOT Office by the deadline to be included in the announcement by the BOT. Council candidates are officially nominated by the BOT during the Opening Session of the HOD.

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

Under AMA bylaws, a delegate may also nominate candidates for council and officer vacancies from the floor.
Conflict-of-interest disclosures
Under AMA-HOD policy, all candidates for election are required to complete a conflict-of-interest/disclosure of affiliations form prior to their election. Candidates should contact the Office of General Counsel (ogc@ama-assn.org) for information on completing the form. Forms must be submitted by March 15 of the year in which the individual is seeking election to appear in the election manual. Completed forms are posted in the “Members-only” section of our AMA website. Completion of this form is required of all candidates for election, including those nominated from the floor. (G-610.020[25])

Campaigns
Active campaigns for AMA elective office may not begin until the AMA-BOT has announced the nominees for council seats after its April meeting. Active campaigning includes mass outreach activities such as emails directed to all or a significant portion of the members of the AMA-HOD, communicated by or on behalf of the candidate. (G-610.020[10])

At the Opening Session of the House of Delegates, each officer candidate in a contested election will give a two-minute self-nominating speech. The order of the speeches will be determined by lot. No speeches for unopposed candidates will be given, except for president-elect. When there is no contest for president-elect, the candidate will ask a delegate to place his or her name in nomination, and the election will then be by acclamation. When there are two or more candidates for the office of president-elect, a two-minute nomination speech will be given by a delegate. In addition, the speaker will schedule a debate in front of the AMA-HOD to be conducted by rules established by the speaker or, in the event of a conflict, the vice speaker. (G-610.020[24])

There are no nominating or seconding speeches for council candidates; the names of council nominees are announced at the Opening Session of the AMA-HOD, after which the speaker will call for additional nominations from the floor. Candidates who are unopposed will be elected by acclamation.

Guiding principles for AMA-HOD elections
Policy G-610.021 lays out the guiding principles for AMA-HOD elections, and delegates are encouraged to consider its tenets carefully. The policy reads as follows:

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 about which candidates to vote for.

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.
AMA election process

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.

Campaign rules

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

Expenses, events, parties and other activities

1. Campaign expenditures and activities should be limited to reasonable levels necessary for adequate candidate exposure to the delegates. Campaign memorabilia and giveaways that include a candidate's name or likeness may not be distributed at any time. (G-610.020[17]) Campaign memorabilia may not be distributed in the Not for Official Business (NFOB) bag. (G 610.020[14])

2. 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 four or fewer delegates or alternates are exempt from this rule. (G-610.020[21])

3. Campaign parties are allowed only at the Annual Meeting. 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. (G 610.020[22])

   In 2022 and 2023 our AMA will host a candidate reception. (The reception will be evaluated thereafter.) Candidates may be featured at the AMA reception or at another reception, but not both. The 2022 reception is scheduled for 5:30 p.m. Sunday, June 12.

4. 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. (G-610.020[18])

5. Candidates for AMA office should not attend meetings of the state medical societies unless officially invited and could accept reimbursement of travel expenses by the state society in accordance with the policies of the society. (G-610.020[20])
Campaigning, literature and publicity

1. 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. (G 610.020[19])

   *This rule prohibits campaign parties as well as the distribution of campaign literature and gifts at the Interim Meeting. Announcements of candidacy (see above) may occur at the Interim Meeting.*

2. Displays of campaign posters, signs, and literature in public areas of the hotel in 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 at which the candidate is featured. (G-610.020[23])

3. Campaign materials may not be distributed by postal mail or its equivalent (e.g., UPS or FedEx). Printed campaign materials will not be included in the “Not for Official Business” bag and may not be distributed in the House of Delegates. Candidates are encouraged to eliminate printed campaign materials. (G-610.020[15])

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. (D-610.998[2]) Candidates will be allowed to customize their individual pages within the template, but other layouts will not be possible. The pages are meant to supplement, not repeat, material from the election manual, but the content is up to the candidate.

5. An election manual containing information on candidates for election who have announced their intentions to seek office by March 15 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 that they consider important to bring before the members of the AMA-HOD. The election manual serves as a mechanism to reduce the number of telephone calls, mailings and other messages members of the House of Delegates receive from or on behalf of candidates. (G 610.020[9])

6. A reduction in the volume of telephone calls from candidates, and literature and letters by or on behalf of candidates is encouraged. The use of electronic messages to contact electors should also be minimized, and, if used, must allow recipients to opt out of receiving future messages. (G-610.020[16])

   *The HOD office will send one email on behalf of all candidates. Candidates have been invited to submit materials of their choosing for inclusion in the email.*

7. 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 Meeting. (G 610.020[23])
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. Per the rules in Policy G-610.020, the speakers’ office will schedule in-person interviews with officer candidates in contested elections for regional caucuses and the Specialty and Service Society if requested. Any group that wishes to conduct in-person or virtual interviews must submit contact information for an individual responsible for scheduling the interviews and specify which contests for which they wish to interview. Deadlines for submission of this information to the HOD Office (HOD@ama-assn.org) will be announced for in-person and virtual interviews.

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.**

*An official list of groups wishing to conduct interview and candidates, as recommended by the Election Task Force, affords transparency to all candidates seeking interviews, while allowing groups to decide if, when, how, and for which contests they wish to interview.*

Interviews conducted with current candidates must comply with the following rules:

- Interviews may be arranged between the parties once active campaigning is allowed.

- 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 group may meet with a candidate who is a member of their group without interviewing other candidates for the same office.
  - 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.
  - 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.

- Groups may elect to conduct interviews virtually or in-person.

- In-person interviews may be conducted between Friday and Monday of the meeting at which elections will take place.

- Virtual interviews are subject to the following constraints:
  - Interviews may be conducted only during a window beginning on the Thursday evening two weeks prior to the scheduled Opening Session of the House of Delegates meeting at which elections will take place and must be concluded by that Sunday (four days later).
  - Interviews conducted on weeknights must be scheduled between 5 p.m. and 10 p.m. on weekends between 8 a.m. and 10 p.m. based on the candidate’s local time, unless another mutually acceptable time outside these hours is arranged.
  - Caucuses and delegations scheduling interviews for candidates within the parameters above must offer alternatives to those candidates who have conflicts with the scheduled time.
AMA election process

- Recording of interviews is allowed only with the knowledge and consent of the candidate.
- Recordings of interviews may be shared only among members of the group conducting the interview.
- A candidate is free to decline any interview request.
- 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.

Policy also encourages the speakers to conduct and record virtual interviews with candidates and post those interviews on the AMA website. These interviews will be available in the second half of May.

Elections

Nominations will be accepted on Friday, June 10, 2022, during the Opening Session of the AMA-HOD. Uncontested candidates will be elected by acclamation at that time. Voting for contested elections will be held during the Election Session to be held at 8 a.m. on Tuesday morning June 14, 2022. All delegates should be seated in the House at that time.

Only credentialed delegates are permitted to cast a ballot. If a delegate cannot participate in the Election Session, they may have a designated alternate delegate properly credentialed by Monday June 13, 2022, 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.

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

Those candidates who are elected officially take office at the conclusion of the AMA-HOD meeting.
Willarda V. Edwards, MD, MBA

Five-year-old Willarda was drawn to medicine long before she could wield a stethoscope. When her mother gave her brother a toy doctor’s bag and her a nurse’s, Willarda coveted his and wrestled it away. Thus, began a more than 30-year career of service to her patients and our profession.

Born in Maryland, Willarda grew up in El Paso, studied pre-med at The University of Texas, won a Navy scholarship to attend medical school at the University of Maryland, served her residency in Baltimore and began active duty at the Annapolis Naval Clinic and in the internal medicine department at Bethesda Naval Hospital.

Next, Willarda took on the challenge of opening a private internal medicine practice in the greater Baltimore area ... this while serving in the Navy Reserves, retiring at the rank of commander and going on to earn an MBA to help her growing practice. Early on, as a member of the Student National Medical Association, Willarda realized the power of organized medicine, the value of mentors, and the good that comes from professional unity at all levels. She has held top leadership positions at local, state, and national associations, including the AMA Board, National Medical Association, Maryland State Medical Society, Baltimore City and Monumental City medical societies.

Most recently, the Maryland Department of Health appointed Willarda to the state Advisory Board for the new CMS primary care program. For the past 10 years she has served on the Board of CRISP, a tri-state regional health information center. Last year she was elected to the Sequoia Project Board, a national collaborative focused on implementation of secure inter-operable health information exchange.

Joining AMA in 1994, Willarda was appointed to the inaugural governing council of the AMA Women Physicians Congress (now the AMA-WPS) and later served as chair. Her AMA record of service ranges from reference committees, chair of the HOD Committee on Compensation of Officers and the AMA Council on Constitution and Bylaws to Board level responsibilities such as liaison to AMA-RFS, CEJA and AMA Foundation.

The Maryland State Medical Society asks you to join Maryland Delegation to the AMA, American College of Physicians, National Medical Association, AMA Minority Affairs Section, and Southeastern Delegation in their proud support of Willarda’s candidacy.

From the White House to Maryland’s State House, Willarda is an experienced and respected advocate for American medicine and worthy of your vote. Bringing her leadership record as a consensus-building, not-afraid-to-get-her-hands-dirty worker, she, respectfully, asks for your vote for president-elect.

**Personal statement**

“I have long viewed our AMA as the Spandex of American medicine ... we built the framework that sets and maintains our infrastructure yet provides the exceptional elasticity to accommodate the wide range of scope and size that shapes the practice of our profession.”
Jesse M. Ehrenfeld, MD, MPH

The American Society of Anesthesiologists, the AMA Young Physicians Section, the Specialty and Service Society (SSS), the Academic Physicians Section, the Wisconsin Medical Society, and GLMA: Health Professionals Advancing LGBTQ Equality are all pleased to endorse Jesse M. Ehrenfeld, MD, MPH, FASA, FAMIA, for election as president-elect of the American Medical Association.

Dr. Ehrenfeld is a current member of the AMA Board of Trustees, served as Board chair from June 2019 to June 2020, and has been an Executive Committee member for four years. Active in organized medicine since medical school, Dr. Ehrenfeld’s experience has been broad and diverse. He served as speaker of the Massachusetts Medical Society, on the board of the Illinois State Medical Society, and a member of the governing councils of both the AMA Young Physicians Section and the AMA Resident and Fellow Section.

Dr. Ehrenfeld is board certified in both anesthesiology and clinical informatics and has an extensive background in advocacy, health care policy, and an academic portfolio which is deep in teaching, service and clinical research. He is a senior associate dean and tenured professor of anesthesiology at the Medical College of Wisconsin (Milwaukee, Wisc.), an adjunct professor of anesthesiology and health policy at Vanderbilt University (Nashville, Tenn.), and an adjunct professor of surgery at the Uniformed Services University of the Health Sciences (Bethesda, Md.).

Dr. Ehrenfeld leads a $560 million statewide health philanthropy, while also caring for patients each week in the operating room. His research, which focuses on understanding how digital technology can improve surgical safety and patient outcomes, has been funded by the National Institutes of Health, the Department of Defense, and the Robert Wood Johnson Foundation. His work has led to the publication of more than 200 peer-reviewed manuscripts. He is editor-in-chief of the Journal of Medical Systems and has co-authored 18 clinical textbooks that have been translated into multiple languages. An Emmy-nominated photographer, Dr. Ehrenfeld has received numerous awards including a White House News Photographers Association award and the inaugural Sexual & Gender Minority Research Investigator Award from the director of the NIH.

Dr. Ehrenfeld holds a Doctor of Medicine from the University of Chicago and a Master of Public Health degree from the Harvard School of Public Health. He completed his residency and fellowship in the department of anesthesiology at the Massachusetts General Hospital. A combat veteran and former U.S. Navy commander, Dr. Ehrenfeld deployed to Afghanistan during both Operation Enduring Freedom and Resolute Support Mission and served as a special advisor to the 20th U.S. Surgeon General.

Personal statement

“Now more than ever, our AMA needs a president who can unify the House of Medicine, from sea to shining sea. While we may serve patients from different geographies, using different approaches, and working in different practice modalities, we share a common purpose: to promote the art and science of medicine and the betterment of public health. As your president, I will bring us back together and ensure that the voice of physicians is always the loudest and most effective voice in the room.”
Russ Kridel, MD

Russ for All of Us: Russ Kridel is a frontline physician in active private practice. Like you, he lives the red tape and regulations that interfere with patient care. He’s a proven leader who doesn’t give up and doesn’t back down. Russ is the advocate you need as your voice of our AMA.

Proven, effective leader for all physicians: Russ has led at every level. From serving as president of his specialty and county medical societies, to the MSS (which he helped form), RFS and SSS governing councils, to AMA board chair, he has been an outstanding, visionary leader who makes certain all voices are heard. He expedited the formation of the AMA Private Practice Physicians Section, and as chair of Awards and Nominations, Russ championed diversity in recipients and future leaders.

Tireless public health leader: Russ has been devoted to public health his entire career. He is passionate about access for underserved patients and has championed diversity since medical school, both within and outside of organized medicine. He created the Face Foundation to provide no-cost care for victims of domestic violence. During his seven years on CSAPH, which he chaired, the council produced numerous landmark scientific reports on firearm safety, obesity, cannabis use and disparities in maternal health care. The pandemic exposed the vulnerabilities of an inadequate public health structure, and Russ believes the AMA must lead in closing these tragic gaps.

Successful private practitioner, scientist and educator: With a busy private practice, Russ understands first-hand the challenges facing physicians, including the hassles of prior authorization, EHR interoperability and inadequate reimbursement. In the early days of COVID-19, he steered the AMA to put science before politics and secured billions of dollars in emergency funding for physicians, leading the expansion of telehealth and acquiring life-saving PPE for physicians. As AMA BOT chair, Russ led the effort to craft surprise medical billing legislation, ensuring a fair outcome for physicians. Physicians must lead health care teams, and while serving on the executive committee of the Scope of Practice Partnership, he advocated extensively on scope issues. A passionate supporter of medical education, Russ is a full clinical professor and director of a facial plastic surgery fellowship program at UT Health Science Center and has mentored over 30 fellows and published over 180 scientific papers.

Supported by colleagues: Russ will use his depth of expertise, tireless advocacy and visionary leadership to represent physicians and patients. For these reasons and more, the AAFPRS, TMA, AAO-HNS, ACS, AAPI and AMA section councils on International Medical Graduates, Plastic, Reconstructive & Maxillofacial Surgery, Otolaryngology, and Neurosurgery Delegation proudly endorse Russ Kridel, MD, FACS, for president-elect of our AMA.

Personal statement
“The shifting landscape of our medical world requires physician input more than ever. I am the passionate, experienced and effective voice the AMA needs to speak for all physicians and patients in these increasingly challenging times. I would be honored to be that voice and respectfully ask for your vote.”
Over these past two years we have all heard the phrase “these unprecedented times” far too often. Yet, it is true, we have never experienced anything like this pandemic and the way it has disrupted patient care, our practices, our personal lives and even our House of Delegates. No question—we all yearn for a return to normalcy.

Through it all Dr. Bruce Scott has worked diligently as the speaker of our House of Delegates (HOD) to preserve the essential role of our HOD as the policymaking body of our AMA. Faced with the cancellation of our in-person meetings, Bruce led the effort to design “Special Meetings” that provided a platform to carry on the important work of the House of Delegates. Together with the AMA team and our vice speaker, Dr. Lisa Egbert, he is committed to ensuring a safe return to an in-person meeting.

Both at in-person meetings and the recent virtual meetings, Bruce has presided over the deliberations of our House with an effective leadership style which combines fairness and a sense of humor. Meetings with Bruce at the podium run smoothly and efficiently. During his tenure, Dr. Scott has guided the reform of our election rules to reduce barriers and equalize opportunities for candidates, while maintaining delegates ability to vet candidates.

Between our HOD meetings, Dr. Scott is an effective advocate for the actions of our HOD and a respected member of the Board of Trustees (BOT). He is a member of the Executive Committee and chair of both the Audit Committee and the Governance Committee. He was selected to serve on the Board of Directors for Health2047—taking a leading role in shaping the future of medicine.

Prior to his election as speaker, Bruce served as our vice speaker for four years. His leadership in organized medicine goes back over 30 years. During this time, he served as chair of the AMA-RFS, delegate from the AMA-YPS to the HOD, the young physician on the AMA BOT, and a delegate representing Kentucky. At the state level, he has been the governor of his specialty society and president of his state and county medical societies.

Once again, the Kentucky Medical Association and the Kentucky Delegation are proud to nominate Dr. Bruce Scott to continue as speaker of our House of Delegates. Dr. Scott’s nomination is enthusiastically endorsed by the Southeastern Delegation.

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

**Personal statement**

“Thank you. Thank you for your patience and understanding as we have navigated through these Special Meetings. Thank you for your thoughtful suggestions and valuable feedback. Thank you for your support and words of encouragement. Thank you for your optimism and flexibility as we plan a return to in-person meetings. Most of all, thank you for giving me the opportunity to lead the House of Medicine over these past 3 years. It is an honor to serve as your speaker in any format.

“I look forward to seeing all of you in person in June!”
Vice speaker (vote for one)

Lisa Bohman Egbert, MD

The Ohio State Medical Association and its delegation to the AMA are proud to nominate Lisa Bohman Egbert, MD, for her fourth term as vice speaker of the American Medical Association. Dr. Egbert’s nomination is enthusiastically endorsed by the Great Lakes States Coalition.

Alongside our speaker, Lisa has worked diligently this past year to preserve the policymaking role of our House of Delegates despite the persistence of the COVID-19 pandemic necessitating our third and fourth Special Meetings. It is her fervent hope that these were the final Special Meetings over which she will ever need to preside.

In addition to her duties as vice speaker and as a member of our Board of Trustees, she is privileged to serve on the AMA Foundation Board and its Executive Committee. She is also a member of the COLA Board, the Litigation Center Executive Committee, the AMA Council on Constitution and Bylaws, and the Election Committee. She serves as a board liaison to the AMA Medical Student Section and AMA International Medical Graduate Section.

This past year, Dr. Egbert has also been privileged to serve as the president of the Ohio State Medical Association. She is proud to have presided over its first fully virtual House of Delegates meeting in 2021 and is hopeful to return to an in-person meeting in 2022. She was honored to be asked by the governor and the Ohio Department of Health to speak on vaccine safety, especially in pregnancy, at multiple press conferences.

Lisa’s previous service to our AMA dates back to her days in medical school and includes having served as the student representative on the Women in Medicine Advisory Panel, as a member of the AMA Resident Physician Section Governing Council, and as the chair of the AMA Young Physicians Section. She also previously served on the AMPAC Board of Directors and the AMA Council on Medical Service. She credits these experiences with the broad understanding of our AMA that she brings to our AMA Board.

Dr. Egbert continues in solo private practice as a general ob/gyn, and despite the dwindling number of physicians in private practice, she hopes to continue. Her pledge is to advocate on behalf of all physicians, and especially to maintain private practice as a viable option for future generations of physicians.

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, twins, David and Sarah, and their youngest, Matthew. They are excited to welcome Ashleigh, David’s fiancé to the family.

Personal statement
“As I write this, I still find it unfathomable that our AMA House has not met in person for four consecutive meetings. I am very grateful to have been able to work with our fabulous speaker to develop and execute our Special Meetings but hope with all my heart that we will all be together in June! I would like to thank you all for the honor and privilege of serving you as your vice speaker and humbly ask for your vote for re-election.”

Lisa Bohman Egbert, MD
The California Medical Association (CMA) is proud to nominate Alexander Ding, MD, MS, MBA, for election to the AMA Board of Trustees. Dr. Ding is endorsed by the PacWest Conference, American College of Radiology, Section Council on Radiology, Society of Interventional Radiology, American Society of Anesthesiologists, and the AMA International Medical Graduate Section, AMA Minority Affairs Section, and AMA Young Physician Sections.

He is a board-certified radiologist practicing as an assistant professor at the University of Louisville and is physician executive-in-residence in the Office of Health Affairs & Advocacy at Humana. In this role, he works to empower and enable practices in value-based care, manages physician career development, directs efforts on physician satisfaction and organizational focus on delivering on health outcomes, and strategizes on reducing friction points and administrative burdens to practices.

Previously, he was in private practice as managing partner at California Advanced Imaging. He served in medical staff leadership, including chief of radiology and medical director of imaging at Sutter Mills-Peninsula Medical Center and vice chief of staff and chair of quality at San Mateo Medical Center. He is a gubernatorial appointee to the State of California Health Professions Education Foundation Board, charged with ensuring a sufficient health care workforce in underserved and rural areas.

Dr. Ding has been active in organized medicine since medical school and has served in numerous leadership positions throughout the Federation. At the state and local level, he has served on the Massachusetts Medical Society Board of Trustees, CMA Council on Science & Public Health, and as president of the San Mateo County Medical Association. At the AMA, he currently chairs the AMA Council on Science and Public Health, and has served on the AMA Council on Legislation, AMPAC Board of Directors, and as the resident member of the AMA Board of Trustees.

He is engaged with innovators in medical technology and digital health, having served as an advisor and consultant to numerous companies, including Doximity, Eko, and Google, with the goal of ensuring tech understands health care delivery, medical practice, workflow, and clinical value.

Dr. Ding earned a BA in economics and MS in public health from the University of California Berkeley, an MBA in finance from The Wharton School, and an MD from UCSF. He completed residency in diagnostic radiology and fellowships in abdominal imaging and interventional radiology at the Massachusetts General Hospital. He is a U.S. Navy veteran.

Personal statement
“Physicians have shown up during the pandemic and carried the weight of this country on their shoulders. They have shown compassion, faith in data & science, and sacrifice. But most are disappointed in how society has shown up for them. They are frustrated, burned out, and leaving practice. It critical that our AMA stands up for doctors, focus our efforts on supporting physicians across the gamut, and show them that we are in their corner.

“The pandemic has also exacerbated societal divides and laid bare the health consequences of these disparities. Our AMA must work to bridge these rifts and stand in the corner of those patients most unable to standup for themselves.”
Scott Ferguson, MD

Elected to the American Medical Association Board of Trustees in June 2018, Scott Ferguson, MD, has a long history of representing physicians and patients in his hometown, his state of Arkansas and nationally. Dr. Ferguson is a former chair of the AMA Council on Legislation and served on the council for eight years. He has also been chairman of the FDA National Mammography Quality Advisory Committee.

Dr. Ferguson is a member of the Executive Committee of the AMA Board of Trustees and serves as the secretary of the Board. He is a past chair of the board’s Finance Committee. During his time on the board, he has served as the AMA representative to the PCPI board of directors and its Executive Committee, to the AMA Council on Medical Education, and the AMA Council on Science and Public Health. Dr. Ferguson has also been a trustee liaison to the AMA-IMG Section, the AMA Minority Affairs Section, the AMA Women Physicians Section and the Coalition for Physician Accountability.

A practicing radiologist in West Memphis, Ark., Dr. Ferguson is a fellow of the American College of Radiology. He has served as the president of his county medical society and of the Arkansas Medical Society, where he also served as chairman of the society’s Legislative Committee as well as the PAC Committee for 10 years. Prior to being elected to the AMA Board of Trustees, he served on and chaired the Arkansas delegation to the AMA House of Delegates and served as vice chair of the AMA Radiology Section Council.

As a member of the state legislature in Arkansas, Dr. Ferguson was a driving force for physicians and patients, working on landmark legislation including “any willing provider,” the comprehensive children’s health care program (CHIP), childhood vaccinations/immunizations, and enhanced medical care for pregnant women, newborns and mastectomy patients. Since leaving the state legislature, Dr. Ferguson has continued to spearhead efforts for tort reform, network adequacy, expansion of health care coverage and telehealth.

Dr. Ferguson’s passion for advocacy is shared by his wife, Deborah, a current member of the Arkansas state legislature. They have three children: Catherine, an emergency medicine physician in California; Scott, a software engineer in California; and Caroline, a PhD graduate of Stanford University.

Endorsements: Dr. Ferguson is endorsed by the Southeastern Delegation of the AMA, the Arkansas Medical Society, the American College of Radiology, the AMA Section Council on Radiology, the Radiological Society of North America, the Arkansas Radiologic Society, the American Society for Radiation Oncology and the AMA International Medical Graduates Section.

Personal statement
“I have spent my career fighting to preserve physician choice, autonomy, patient protections, and the doctor-patient relationship. I want to emphasize the importance of the AMA Board of Trustees as advocates for the AMA House of Delegates, our medical profession, and especially for our patients. I look forward to continuing to learn, listen, and lead as an AMA Trustee and ask for your vote to serve on the Board.”
The American College of Physicians is proud to sponsor Sandra A. Fryhofer MD, MACP, as a candidate for re-election to the AMA Board of Trustees. Her candidacy is endorsed by Georgia, Southeast, ACOG, SSS, AMA-IMG, AAPI, Cancer Caucus, ASA and AMA-YPs.

History of Commitment and Dedication to the AMA

- Board liaison to AMA councils: Medical Service, Legislation; to Sections: LGBTQ, AMA-MAS, Senior Physicians, and AMA-RFS; and to Scope of Practice Partnership Steering Committee
- Chair, AMA Council on Science and Public Health CSAPH representative: Commission to End Health Care Disparities; National Influenza Summit
- AMA/ACP liaison to CDC Advisory Committee on Immunization Practices since 2001: serving on work groups for COVID-19, flu, zoster, HPV, pneumococcal vaccines, and the Adult Schedule
- Chair, AMA Convention Committee on Rules and Credentials; member, Select Committee
- Joined AMA in 1983; delegate since 2000

Proven Leadership

- President, American College of Physicians (ACP)
- Chair, ACP Committee on Women's Health
- ACP Board of Regents
- Board of Directors, Medical Association of Atlanta
- MAA delegate to Medical Association of Georgia

Valuable Experience

- Practicing general internist in Atlanta, Georgia
- Adjunct clinical associate professor of medicine, Emory University School of Medicine
- Various committees and panels for CDC, IOM, and other organizations addressing breast and cervical cancer screening, STD guidelines, CDC Folic Acid Task Force, racial/ethnic inequities, obesity, challenges facing the uninsured, women’s health issues, and immunizations

Effective Communicator

- Recurring appearances on AMA’s “COVID-19 Update” video series to discuss vaccine developments
- National spokesperson for the “Doctors for Adults” public education campaign
- Medical correspondent for CNN Headline News
- Testified before Congress for AMA/ACP
- Host of Your Health Matters series on Georgia PBS affiliate
- Staying Well and Medicine Matters with Sandra Fryhofer, MD, in print and video, WebMD’s Medscape

Credible, Credentialed

- BChE, chemical engineering (high honors), Georgia Institute of Technology
- MD, Emory University School of Medicine (Alpha Omega Alpha)
- Internal medicine internship and residency, Emory affiliated hospitals
- Mastership in ACP (MACP); Fellow, Royal College of Physicians (FRCP)

Personal statement

“The practice of medicine faces challenges—from payers, hospitals, physician employers, government—and now a pandemic. To succeed, we must be resilient, persistent, and effective. Now more than ever, our future, and that of our patients, truly depend on the house of medicine speaking with one voice through the AMA’s policy and advocacy efforts. I know the future can be bright if we make the effort to listen and learn from each other, and put what we learn into action. I will continue to listen. I am committed, experienced, and qualified. I would be honored to serve you and our patients as a re-elected member of our AMA Board of Trustees and respectfully ask for your vote and support.”
Marilyn Heine, MD

Marilyn Heine, MD, FACEP, FACP, FCPP, is a champion for physicians, patients, and public health. She has a proven track record as an exemplary leader, accomplished advocate, and passionate mentor. She strategically builds coalitions and galvanizes grassroots on advocacy priorities. She is a keen listener, an accessible and responsive communicator, and a consensus builder who is inclusive of diverse perspectives. Marilyn is uniquely qualified for our AMA Board of Trustees.

Marilyn is in active practice in southeast Pennsylvania. She has expertise in emergency medicine and hematology oncology, and has worked in private practice and employed models, urban and non-urban locations, community-based, hospital, and academic settings. She is clinical assistant professor of medicine at Drexel University College of Medicine.

Marilyn is an esteemed leader with a tireless work ethic. She is the immediate past chair of the AMA Council on Legislation and liaison from the council to the AMA Scope of Practice Partnership. She represents the AMA on the CAQH CORE Board where she promotes administrative simplification for physicians. She is a past board member of AMPAC, and served on the AMA Private Practice Physicians Congress Governing Council and the AMA Ambassador program inaugural Steering Committee. She serves on the executive committees of the Forum for Medical Affairs and Mobility Caucus, and held leadership roles in national specialty societies and the Federation of State Medical Boards.

Marilyn served as president of the Pennsylvania Medical Society and of the Pennsylvania College of Emergency Physicians, and chair of PAMPAC. Pennsylvania’s governors appointed her to the Commonwealth’s Health Care Reform Implementation Advisory Committee, Pennsylvania’s eHealth Collaborative, and the State Board of Medicine whose members elected her to serve as chair.

Marilyn is a tenacious advocate. Marilyn testified before Congress and the state legislature. She advised a U.S. president, inspires members of Congress to advance issues essential to physicians, and chairs a Congressional Physicians Advisory Board where she is a strong bipartisan leader. Marilyn advocates expertly on social media.

Marilyn is a dedicated mentor for medical students and physicians. She serves as faculty nationally and regionally on health policy, medical student and physician advocacy, and scope of practice.

Marilyn has received many accolades including most recently the inaugural AMPAC Award for Political Participation, the AMA Women Physicians Section Inspiration Award, the PACEP Award for Outstanding Contribution to Emergency Medicine, and the ACEP Award for Excellence in Health Policy.

Marilyn is enthusiastically nominated by the Pennsylvania delegation; endorsed by ACEP, ACP, AAPI, ASCO, Cancer Caucus, Great Lakes States Coalition, Mobility Caucus, PACEP, PAMED, Section Council on Emergency Medicine, and AMA-IMG Section, AMA Minority Affairs Section, and AMA Young Physicians Section.

Personal statement
“This is a time of significant change and challenge in medicine. The AMA’s role to shape the future of medicine is evermore essential. My experiences as a leader, advocate, and mentor strengthen my ability to serve you, to ensure your voice is heard. I ask for your vote.”
“The past few years have strained our public health care system and placed enormous emotional and financial stress on physicians across the country. Many practices have been forced to close or to merge with large health care systems. The current financial and political landscape of health care threatens the very existence of independent practices. The newly formed AMA private practice section is a good start, but much more is needed. COVID-19 has killed an unconscionable number of citizens and exposed many public health flaws needing immediate attention. Our AMA has been forced to meet virtually for two years now; we need to work hard to reestablish functional live AMA meetings recognizing that some delegates have never attended an in-person meeting. Our longstanding problems of excessive pharma costs, intrusive prior authorization abuse, burdensome insurance demands, and inadequate funding has strained practicing physicians to the breaking point. Telehealth should continue after the pandemic, but we need to make sure that the rules stipulate telehealth is for established practices and not national doc in the box’ chains. We must forcefully defend the doctor/patient relationship, especially the assault on women’s health and autonomy.”

Mario Motta has been active in organized medicine and the AMA since medical school. A member of the AMA House of Delegates since 2003, Mario served eight years on the AMA Council on Science and Public Health. He introduced resolutions and authored reports on the obscene and unjustified rise in drug prices and generic drug shortages. Mario has published significant reports on environmental light pollution that have changed the lighting industry. Many cities now demand human health safe lighting to combat glare, circadian rhythm disturbance, environmental harm, and cite their lighting as being “AMA compliant.” For the past two years, Mario has served on a United Nation’s commission on human health effects of lighting.

As president of the Massachusetts Medical Society, he dealt with issues regarding the health care delivery system, health insurance, scope of practice, young physician engagement, and burnout. As chair of the Committee on Legislation, he was intimately involved with Massachusetts health care reform; Massachusetts now has the lowest rate of uninsured in the United States.

He is board certified in cardiology and nuclear cardiology, is a clinical professor of medicine at Tufts University, was research director for his practice, and has mentored students and residents.

A well-known astronomer who has constructed his own telescopes, he works with the American Association of Variable Star Observers, the Harvard Center for Astrophysics, and MIT, and has numerous observations and publications with professional astronomers. For this work, the American Astronomical Society has named an asteroid in his honor.

The Massachusetts Medical Society and the New England Delegation to the AMA proudly sponsor the candidacy of Mario Motta, MD, FACC, for re-election to the AMA Board of Trustees. He is endorsed by the Academic Physicians Section, American College of Cardiology, and the American Society of Nuclear Cardiology.

“I have a proven record of activism and ask for your vote for a second term on the Board of Trustees.”
Young physician trustee (vote for one)

Toluwalasé (Lasé) Ajayi, MD

I immigrated to the US from Nigeria with my family when I was seven. During that journey, I experienced a health system which made me feel less than human. I told my mom that I wanted to be a doctor so no one would ever again feel the way I did. This drive to improve healthcare led me to organized medicine. I believe in the collective power of physicians to transform healthcare for all.

—Dr. Ajayi

Toluwalasé (Lasé) Ajayi, MD, FAAP, is a community pediatrician, pediatric and adult palliative medicine specialist, and clinical researcher. Lasé is nominated for the young physician seat on AMA BOT by the American Academy of Pediatrics with endorsements from the AMA-YS, PacWest, AMA-MAS, ACOG, AAHPM, and California Medical Association.

Dr. Ajayi is the immediate-past chair of the AMA-YPS, chair of the CMA Council on Medical Services, and an AAP delegate to the HOD. Lasé has broad experience across organized medicine and has demonstrated exceptional leadership. She skillfully led the YPS through an advocacy landscape complicated by COVID while strengthening CMA policies to help practicing physicians across California.

Dr. Ajayi sees too many patients living in health care deserts while her physician colleagues experience barriers to serving under-resourced communities. Her mentorship of students and residents personalizes how we must alleviate those barriers as one way to improve health care access. Through her research and as chair of CMA-CMS, Lasé has experience bringing cutting-edge technology to her physician colleagues and will help position our AMA to meet physician needs in a post-COVID landscape. She also understands that historically and systematically marginalized people have good reason to be wary of health care. Her research uses mobile health technology to engage pregnant persons of color as a means of eliminating health disparities. She knows how such technologies can be harnessed to empower physicians and patients as well as to improve access to high-value care.

The emotional and physical ramifications of this pandemic amplified the stress felt by many physicians who work within a broken system. As a physician wellness committee chair and palliative specialist, Dr. Ajayi has seen first-hand how the ramifications of this pandemic have negatively impacted her physician colleagues. She will bring this experience to move us beyond talking about burnout and instead focus our work on physician thriving.

Lasé brings thoughtful listening and collaborative action to everything she does. Her broad experience and expertise, passion for improving our health care system for patients and physicians alike, and her ability to solicit input and build consensus will be an invaluable addition to our BOT.

I’m a first-generation immigrant, mother of three, physician spouse, researcher, and Black woman physician who cares for patients at both ends of the life spectrum. Our patients deserve our best efforts to reform our healthcare system—shattering barriers to care and uplifting the quality of care we provide while allowing physicians to regain their joy in practicing medicine. Together our AMA will transform our health system to meet the diverse needs of our patients and physician colleagues.

—Dr. Ajayi
Kevin C. Reilly, MD

Kevin C. Reilly, MD, was first appointed to the American Medical Association Council on Constitution and Bylaws in 1997. He was then twice elected by the House of Delegates to continue his service on the AMA Council on Constitution and Bylaws as the resident and fellow member from 1998 to 2003. In 2003 the House of Delegates elected him to serve two years on the AMA Board of Trustees. He returned to the AMA Council on Constitution and Bylaws in 2018 and currently serve as vice chair of the council.

Dr. Reilly attended his first AMA meeting in 1994 and has attended every annual and interim meeting since, except when deployed to Afghanistan and to sit for specialty board examination. Over the course of his career, he has served on the HOD delegations for New York, Hawaii, the U.S. Army, American College of Radiology, and American Society of Neuroradiology and the Radiological Society of North America. Since 2011, Dr. Reilly has served as a member of the Radiological Society of North America delegation to the AMA-HOD.

A graduate of Stevens Institute of Technology, Hoboken, N.J., Dr. Reilly earned, and still maintains, professional licensure in civil engineering and planning. Having risen to president of a regional engineering consulting firm engaged in partnership with environmental consultants performing underground storage tank, soil and groundwater remediation work, he completed post-baccalaureate work in organic chemistry and biology. This re-kindled the dream of becoming a physician, specifically a radiologist.

Dr. Reilly graduated from Albert Einstein College of Medicine in The Bronx, with a distinction in research for epidemiology. He entered Army active duty as a transitional intern, then diagnostic radiology resident, at Tripler Army Medical Center, Honolulu. In his chief year, he won first place, retrospective category, of the James W. Bass Research Competition for his work on Swimmer’s CT to improve visualization of the thoracic inlet. The Army selected Dr. Reilly to proceed directly to neuroradiology fellowship at the Hospital of the University of Pennsylvania, and then to his first duty station at Ireland Army Community Hospital, Fort Knox, Ky.

Dr. Reilly has served the Army as a diagnostic radiologist, staff neuroradiologist, neuroradiology division chief, department chief for radiology and nuclear medicine, command surgeon for U.S. Army Recruiting Command, one tour as radiology department chief for a combat support hospital in Afghanistan, and recently returned from Iraq serving as the chief medical officer for Operation Inherent Resolve. He currently serves as the chief of ancillary services overseeing departments of radiology, pharmacy, and pathology. He additionally currently serves as the consultant for radiology to the Army Surgeon General.

Dr. Reilly has served as chair or member of bylaws committees on three occasions for Army hospitals and twice for the AMA Section Council for Radiology. Service minded, he has volunteered in scouting for 20 years, and is in his 15th year volunteering as a community member of the Hardin County Schools Facilities Planning Committee.

Dr. Reilly has been happily married for 26 years and is the proud father of three children.
Adam Rubin, MD

My desire to serve on our AMA Council on Constitution and Bylaws stems from my admiration of our AMA, which is the gold standard for procedural order in organized medicine, and my passion for clear processes and regulations as the foundation of the governing plan of an organization. Our AMA bylaws ultimately allow diverse members of our profession to come together and debate policy using science and evidence. My enthusiasm for bylaws relates to my conviction that bylaws are the bedrock of an organization. For an organization to function effectively, the bylaws need to evolve over time and always provide fair processes for all members.

For the past 20 years I have served our AMA in a variety of capacities. I have substantial experience in our Specialty and Service Society Caucus (SSS), and serve as the current secretary of our SSS Governing Council. Leading up to that, I served for multiple years on SSS committees and our SSS Governing Council as a member-at-large. I served as a delegate of the American Academy of Dermatology (AAD), in the AMA-RFS, AMA-YPS, as well as an AAD alternate delegate and delegate in our HOD. I also served our AMA as a member of our AAD team at the AMA/Specialty Society RVS Update Committee (RUC), and as the American Society for Dermatopathology Advisor to the RUC. For many years, I chaired the handbook review workgroup for the Reference Committee on Amendments to Constitution and Bylaws in our Dermatology Section Council.

Through my leadership experience in other organizations, I have overseen comprehensive bylaws updates and revisions from start to finish, and I am familiar with all of the important aspects that must be addressed to ensure fair and efficient functioning of societies.

For the past 14 years I have been a faculty member and associate professor at the Perelman School of Medicine at the University of Pennsylvania as an academic dermatologist and dermatopathologist. I served as a member of the Hospital of the University of Pennsylvania credentialing committee, billing committee, and as an elected member of the faculty senate. In these roles, the importance of precision in procedural processes, hospital bylaws, and ensuring that colleagues are treated equitably have been in the forefront of my experiences.

As a long-dedicated member of our AMA, and organized medicine, I respectfully ask for your vote so that I may continue to be of service to our AMA as a member of the AMA Council on Constitution and Bylaws.
Steven C. Thornquist, MD

The Connecticut State Medical Society enthusiastically nominates Steven C. Thornquist, MD, for the AMA Council on Constitution and Bylaws. Dr. Thornquist’s campaign is endorsed by the American Academy of Ophthalmology and the New England Delegation.

Dr. Thornquist graduated from the Massachusetts Institute of Technology and obtained his medical degree at the University of Arizona. He competed residency and fellowship programs at Yale-New Haven Hospital, the University of Pennsylvania Scheie Eye Institute and the Temple University St. Christopher’s Hospital for Children.

Dr. Thornquist has been a longstanding member of the AMA House of Medicine, beginning with his first year in medical school. He has served on the Bylaws Committee of the American Association for Pediatric Ophthalmology and Strabismus and been an active member of the Connecticut State Medical Society (CSMS) Bylaws Committee for over 10 years, participating in two significant revisions to the CSMS Bylaws. In addition, Dr. Thornquist oversaw the rewriting of the bylaws of the CSMS Political Action Committee. He has trained in parliamentary procedure multiple times in preparation for various leadership roles in organized medicine and has utilized his training to run town meetings for several years in his hometown in Connecticut.

Dr. Thornquist served as president of the New Haven County Medical Association, the Connecticut Society of Eye Physicians and the Connecticut State Medical Society and currently holds the role of vice-chair of the New England Delegation to the AMA House of Delegates.

Personal statement
“I have always been impressed with the democratic nature of the AMA and its openness to differing viewpoints. My attendance at the AMA meetings while I was in medical school fueled my enduring interest in organizational structure and parliamentary procedure as an effective tool for reaching group decisions.

“I view the Council on Constitution and Bylaws as the bedrock for our AMA’s actions. Our fair and transparent process is key to the legitimacy of our decisions. These are difficult times for deliberative bodies like ours. We are dealing with new ways of communicating and presenting a sea of information that grows daily. Our members are stressed and stretched by multiple concerns. While we, as an organization, look for ways to improve our efficiency, I believe we need to preserve the democracy and openness that so initially impressed me. Only then can we maintain our effectiveness. Though the Council must remain impartial in its advice and interpretations for the House of Delegates and officers, these are the principles that would guide me in my duties. As we evolve to meet the challenges facing organized medicine today, we need to continue to make sure our processes and procedures allow for all voices to be heard fairly, and that our actions affect all of our members equitably, respecting the full diversity of our membership. My experience has prepared me to serve on the Council on Constitution and Bylaws, and I would be honored for the House to grant me that opportunity.”
The American College of Surgeons (ACS) works to inspire quality in medical education and is proud to nominate Daniel L. Dent, MD, FACS, for election to the AMA Council on Medical Education. Dr. Dent is endorsed by the AMA Specialty and Service Society, the Surgical Caucus of the AMA, and a number of medical societies.

Dr. Dent recognizes that medical education is not a point in time; rather, medical education reflects progression across medical school, residency, and practice so that every physician can realize the fullest potential to help patients. His perspective has been shaped by frontline experiences at UT Health San Antonio (UTHSA), where he has received 12 teaching awards, and national leadership positions across specialties. He is professor of surgery and medical education, department vice chair for education, and director of competency assessment for the surgical specialties at UTHSA. He has been a surgical residency program director, president of the Association of Program Directors in Surgery (APDS), and member of our AMA’s Reference Committee C (N-21). Further, he has served on the ACS Board of Governors as education pillar lead, secretary, and vice chair. Last year, he was a panelist for two AMA Ambassador events on preparing for the match and the match interview. Currently, he is an Executive Committee member of the Organization of Program Director Associations and a councilor of the American Board of Surgery.

Dr. Dent understands needs across the lifecycle of medical education, such as medical student loan debt, balance between resident education and service, and relevant continuing professional education. He also knows that our profession has opportunities for improvement in diversity, equity, and inclusion (DEI): he has worked as an ally for those underrepresented in medicine and initiated the DEI Committee in APDS. He is one of three diversity champions selected by APDS to participate in the ACGME/CMSS “Diversity Matters” program. He is an active researcher in medical education and contributing author to the ACS Optimal Resources for Surgical Education and Training textbook and has published over 20 original medical education papers.

**Personal statement**

“As I have worked to improve the medical education experience for students, residents, and colleagues, I have recognized the need to address issues common to all specialties. I want to continue our AMA’s work toward a sustainable medical education system, to include innovation in medical education curricula, a viable physician workforce, and training for physician-led team-based care. Looking forward, we have opportunities to address the financing of medical education and reduce burdensome education requirements for practicing physicians. I am committed to giving our AMA members diverse voices in the leadership of Boards and Residency Review Committees. I ask for your vote so that, together, we can shape the future of medical education that achieves the best patient outcomes while enhancing professional well-being.”

Daniel L. Dent, MD
Suja Mathew, MD

The American College of Physicians (ACP) is proud to sponsor Suja Mathew, MD, FACP, for election to the AMA Council on Medical Education. She is endorsed by the Specialty and Service Society (SSS) and the AMA Minority Affairs Section.

Dr. Mathew has spent much of her career in medical education. A graduate of the Pritzker School of Medicine, Dr. Mathew completed her internal medicine residency at the University of Chicago Hospitals. At Cook County Health System, the public hospital system in Chicago and its suburbs, she served in several clinical, administrative, and educational leadership roles for 22 years. These include course director for the pathophysiology course for all second-year medical students at Rush Medical College, program director of the Stroger Hospital of Cook County internal medicine residency program, and chair of medicine. As chair, she oversaw internal medicine, dermatology and neurology service delivery, as well as the training of hundreds of residents, fellows, and medical students. She held the rank of associate professor at Rush Medical College. She currently serves as chief clinical officer for Atlantic Health System, where she oversees all medical student programs, nine residencies, and six fellowships.

Dr. Mathew has a passion for faculty development and mentoring. Many of her mentees have subsequently received promotion and national recognition. She initiated a women's networking program to support women in their clinical, academic, and leadership advancement. She regularly sponsors residents and faculty and provides support to international medical graduates who are seeking careers in the U.S. She has received honors from Alpha Omega Alpha, the American Medical Women's Association, the Arthur P. Gold Foundation, Congressman Danny Davis, the American College of Physicians, and Women of Impact.

Dr. Mathew has extensive experience in organized medicine:
- ACP regent
- Immediate past governor of the ACP Illinois Northern Chapter
- ACP committees: Health and Public Policy (chair), Performance Measurement, and Governance
- ACP delegate to the AMA House of Delegates

She is a senior physician advisor with the AMA, working with health systems and GME programs to support professional satisfaction, wellness, and practice transformation.

Dr. Mathew is a clinician with extensive experience in medical education leadership, administration, and policy at the local, state, and national levels. Her experience provides important perspectives on achieving the highest quality of education to maintain the excellent clinical care provided by the physicians in this country.

**Personal statement**

“Undergraduate, graduate, and continuing medical education must ensure that we are equipped to care for the complex needs of our patients. Simultaneously, training programs must be designed to meet the needs of learners. The future of our profession depends on our ability to self-regulate training and credentialing, and I consider it a great privilege to contribute to our profession in this way. I will bring my extensive experience with medical education, complex patient care, and policymaking to the Council. I hope to help extend the already strong voice of our AMA to improve the lives of our members and patients. I humbly request your vote.”
Betty Chu, MD, MBA

“I think the world would be a better place if everyone put on scientist goggles a little more often.”

—Adam Grant

During the past four years as an AMA Council on Medical Service member, Betty has drawn from her prior experience as a private practice OB/GYN, a hospital chief medical officer, and currently as a health system leader for quality and safety, to help inform the medical economic policies of our AMA.

The unique experience of leading the COVID-19 response for Henry Ford Health provided her with deep insights into the challenges of our physician workforce, opportunities within our public health infrastructure, and fragmentation of the healthcare continuum. It also reinforced her belief that physician leadership is critical to help translate science into action. Society has had a “crash course” in infection prevention and vaccine science—and our physicians have been called into action to alleviate anxiety and help people navigate through the pandemic.

Betty readily responded to the call to action when she was appointed by the governor to co-chair the State of Michigan Nursing Home COVID Task Force in 2020. She used her experience in health advocacy honed at the AMA and knowledge of local public health policy to focus on reducing deaths through identification of key challenges in our post-acute care model.

Additionally, lessons learned through the pandemic such as COVID-19 vaccine deployment have highlighted the opportunities for closing the gaps on inequities in care delivery. Betty is passionate about addressing disparities in health outcomes by utilizing quality data to identify interventions to impact underserved and minority communities.

In her prior leadership roles within organized medicine, including president of her county and state society, and governing council member of the AMA Integrated Physician Practice Section (IPPS), Betty was always willing to take on a challenge and volunteer her time for the collective advancement of physician issues.

She would like to return to the AMA Council on Medical Service to continue to use her lived and living clinical and leadership experience, combined with the wisdom of our House of Delegates resolutions and external subject matter expertise, to help our AMA Council craft effective and impactful reports to galvanize change.

Betty is honored by endorsements from the AMA Young Physicians Section, the American College of Obstetricians and Gynecologists, the Great Lakes States Coalition, and her state and county societies.

Betty is an avid reader and enjoys being outdoors and spending time with her husband, Navot Shoresh, and their sons, Aidan and Dylan. She can often be found in Ann Arbor on fall Saturdays cheering on the University of Michigan football team.
Stephen K. Epstein, MD, MPP

The American College of Emergency Physicians (ACEP) proudly nominates Stephen K. Epstein, MD, MPP, for re-election to our AMA Council on Medical Service. Steve is endorsed by the Massachusetts Medical Society, the New England Delegation, the Specialty and Service Society (SSS), the Mobility Caucus, and the AMA Young Physicians Section.

Steve is a practicing emergency physician. He has a strong record of service to our AMA, organized medicine, and his community. He is currently on the Executive Committee of the AMA Council on Medical Service, a past chair of the SSS, and chairs the Section Council on Emergency Medicine. He is a delegate to the HOD for ACEP. Dr. Epstein is a collaborative, effective council member, championing the council’s work on coverage for the un- and under-insured, fair payment for quality care, the effects of corporate equity in medicine, and preserving telehealth flexibilities beyond the COVID-19 pandemic.

Within ACEP, Steve has harnessed the use of physician-controlled data in driving better health care. He is the founding chair of the Clinical Emergency Data Registry, a Centers for Medicare & Medicaid Services-approved qualified clinical data registry, and the lead author of the “National Report Card on the State of Emergency Medicine,” an evaluation of the emergency care environment in each state. Additionally, he has served on the leadership team developing ACEP’s Emergency Medicine Data Institute. He is a past-president of the Massachusetts College of Emergency Physicians as well as the Norfolk District Medical Society. He continues to critically serve his community on the board of health throughout the pandemic and provides pro-bono strategic consulting services for Boston-area non-profits.

Dr. Epstein graduated from Harvard Medical School and the Harvard Kennedy School of Government, and then completed residency training at Hennepin County Medical Center in Minneapolis. He practices in the Beth Israel Lahey Health system in the Boston area. He is board certified in emergency medicine, a fellow of the American College of Emergency Physician, an oral examiner for the American Board of Emergency Medicine, and an assistant professor of emergency medicine at Harvard Medical School. An avid skier and recent empty nester with two college students, Steve also volunteers as a physician with the U.S. Ski Team and enjoys travel with his wife, Laura, an orthodontist in private practice.

Personal statement
“I chose to practice emergency medicine in part because the emergency department is where patients come when our health care system otherwise fails them. I joined organized medicine because I believe together we can eliminate these system failures to help our patients and our physicians thrive. I have devoted my career to helping ensure access to quality care for all our patients.

“It has been a privilege to work over the past several years with such a dedicated team of colleagues and staff on the Council as we advance health care for our patients, particularly as we address the influence of government, corporations/private equity, technology, and social determinants of health on our patients and our practices. I would be honored to have your vote for re-election to our AMA Council on Medical Service.”
Ravi D. Goel, MD

As an ophthalmologist and cataract surgeon in private practice, Ravi knows the daily challenges facing physicians.

As an avid student of history, he appreciates that the AMA Council on Medical Service and Public Relations was formed “to streamline medical practice in America with changing times” and with the “least possible interference of non-medical agencies.” Since 1943, CMS has guided our House as the challenges to medical practice may not repeat but often rhyme.

From private practice viability, third party interference, and administrative burdens to personally collecting and submitting federally required quality measures, Ravi works to keep a small practice alive in an ever-changing world.

What happens beyond the exam room is as essential as what happens in it.

An AMA member since his first year in medical school, Ravi is a past YPS chair, served on Reference Committees B and F, chaired Reference Committee J, and received the AMA Foundation’s Excellence in Medicine Leadership Award.

Currently, this New Jersey native is a trustee of the American Academy of Ophthalmology, chair of the AMA Ophthalmology Section Council, and a past president of his state specialty society. He is a seasoned advocate on scope of practice and physician-led teams. He’s a founding director of the Ophthalmology Business Summit.

He financed his undergraduate degree at Yale and medical education at Rutgers Robert Wood Johnson Medical School through a dependence on scholarships, loans, and work-study. He has an appreciation for the magnitude of medical education debt on physician wellness, resilience, and career development.

He completed his residency at Greater Baltimore Medical Center, is an instructor at the Wills Eye Hospital, and is part of an independent, two-physician practice.

With a broad understanding of the issues affecting the daily practice of medicine and the need to deliver action-ready reports and recommendations to our House, Ravi appreciates the essential link that CMS provides to the AMA’s policy-making process.

For his years of service, breadth of knowledge, and experience, the American Academy of Ophthalmology is pleased to sponsor his candidacy to serve on the AMA Council on Medical Service. They are proudly joined by the Medical Society of New Jersey, AMA Ophthalmology Section Council, AMA Mobility Caucus, AMA Specialty and Service Society, American Association of Physicians of Indian Origin, AMA Young Physicians Section, and the Southeastern Delegation to the AMA.

During their downtime, Ravi and his wife Christina spend time with extended family and anticipate a return to post-COVID travel. He also enjoys serving as a trustee of the Indian Cultural Center to promote community relationships in the Delaware Valley.

Ravi respectfully asks for your vote for Council on Medical Service.

**Personal statement**

“In my practice, my mission is to protect sight, one patient at a time. At the AMA, I have the privilege to contribute to the health and well-being of millions of patients. The Council on Medical Service is exciting to me because of its vital role to support the work of the House of Delegates and to improve the practice of medicine for all of us.”
Sheila Rege, MD

The Washington State Medical Association (WSMA) is pleased to nominate Washington state delegate Sheila Rege, MD, for re-election to the AMA Council on Medical Service. Sheila is endorsed by: PacWest, Radiology Section Council, American College of Radiology, American Association of Physicians of Indian Origin, American College of Radiation Oncology (ACRO), American Society of Anesthesiologists, International Medical Graduates Section, AMA Academic Physicians Section, and AMA Young Physicians Section.

Sheila is a warm, generous listener committed to protecting our professionalism. As past chair and now president of ACRO, she has worked to increase board diversity and young physician representation. She is a consensus builder at the WSMA board and a tenacious advocate for physician leadership in health care reform. She is a mentor at the Creative Destruction Lab (CDL), a global initiative to nurture science and tech start-ups. Sheila has met with the CMS Innovation Center to ensure that payment models are physician led with fair payments to primary care and specialists. Sheila is chair of the Washington State Health Technology Clinical Committee and has worked to reduce pre-authorization burdens for patients with state-funded insurance, including Medicaid.

Sheila makes a difference within organized medicine. As county medical society president, her team prevented internists being replaced by nurse practitioners in rural clinics. She co-founded a physician leadership series addressing employment contracts, staffing shortages, and other critical concerns. She understands inconsistencies within health care reimbursements, having served as specialty advisor to the AMA CPT committee. She was elected by her peers to serve on the Executive Committee of the AMA Council on Medical Service.

A board-certified radiation oncologist, Sheila was director of research at LSU Shreveport Department of Radiology. She entered private practice as an employed physician and chair of the Kadlec Hospital cancer program. Sheila is currently the managing partner of a small group practice in Southeastern Washington. She is associate professor at the WSU School of Medicine.

Sheila’s patients know her as a compassionate competent physician who gives back to the community. Together, they created a nonprofit foundation to help raise cancer awareness. Her “Cancer Chat with Dr. Rege” radio program and “Rise Above Cancer” events promote cancer prevention strategies.

Personal statement

“COVID-19 forced us to make substantial changes in how we practice medicine. We feel isolated and misunderstood, and burdensome regulations create obstacles to patient care. Your Council on Medical Service has worked assiduously to face these challenges head on. My experience with diverse modes of practice (employed large group, academic, independent small group) has allowed me to provide a broad perspective, reflecting the heterogeneity within our HOD as we tackle the biggest challenges in health care. I stand ready to carry on my work with the Council to accomplish the mission of our AMA. I ask for your support and vote for a second term on the AMA Council on Medical Service, so that I can continue to listen and advocate for protecting our profession and the patients we serve.”
The Texas Medical Association (TMA) announces Ezequiel “Zeke” Silva III, MD, FACP, FSIR, FRBMA, RCC, for the American Medical Association Council on Medical Service (CMS).

An interventional radiologist in San Antonio, he is on TMA’s Council on Legislation and Delegation to the AMA and was on the TMA 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).

A founding member of the Neiman Health Policy Institute, he has served as chair, American College of Radiology Commission on Economics; economics chair, Society of Interventional Radiology; and president, Texas Radiological Society. He is on the South Texas Radiology Group board and is director of radiology at Methodist Texan Hospital. He is an adjunct professor at the Long School of Medicine in San Antonio.

A member of the Bexar County COVID-19 Task Force, he presented on digital technology along with members of the White House Coronavirus Task Force. The San Antonio Business Journal named him a 2021 Health Care Hero. He completed medical school and residency at Baylor College of Medicine and a vascular and interventional radiology fellowship at Massachusetts General Hospital.

**Personal statement**

“My aspiration as a member of the Council on Medical Service is to reinforce communication among the House of Delegates (HOD), AMA’s advocacy team, and policymakers for the betterment of our profession and our patients.

“I believe physicians know payment. And we appreciate the work and practice cost needed to provide our patients quality care. Physicians also understand how payments affect access to care. I have spent my career advancing the physician’s voice in payment determination, culminating in my current position as AMA RUC chair, leading 32 RUC members and over 300 advisory committee members representing every specialty in our HOD. The RUC’s focus is simple: Patients deserve the best possible care from their physicians. I hope to bring this philosophy to the council.

“I believe physicians know innovation. We should inform the role of new technology, including digital medicine, in patient care. As a founding member and immediate past co-chair of the AMA DMPAG, I have advocated for responsible, physician-informed diffusion of technology into quality patient care. I believe digital technology, including artificial intelligence, offers important tools for physicians who choose to apply this technology in their practice. 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?

“I believe the AMA HOD is the voice of physicians. National policy is only as effective as the local physician experience that informs it. As both a full-time private-practice physician and adjunct medical school professor, I see the importance of both private-practice and academic 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. As a member of the council, I look forward to strengthening this important role.”
Robert L. Allison, MD

The South Dakota State Medical Association and North Central Medical Conference are proud to nominate Robert L. Allison, MD, MACP, for election to the American Medical Association Council on Science and Public Health. Dr. Allison is also endorsed by the American College of Physicians.

Dr. Allison has practiced for the past 24 years as a general internist in a town of 13,000 in rural South Dakota, also serving patients from the surrounding area including several Tribal lands. During this time he has cared for patients in both inpatient and outpatient settings and was a partner in a large multispecialty practice before recently becoming employed by a large health system. However, the thread that can be traced throughout his career is his passion for public health and the unique challenges that rural areas like his face in this aim.

Widely recognized throughout South Dakota's medical community as a staunch proponent of bolstering primary care, Dr. Allison served on the Governor’s Task Force for Primary Care under two administrations. The focus of this work included furthering workforce development efforts, increasing patient access through innovative models of care, and improving the quality of the care delivered for the citizens of South Dakota.

Dr. Allison is also well known for his tireless lobbying efforts and in 2015 won the Richard Neubauer Award, the American College of Physicians’ highest honor recognizing a member of the College for outstanding work in health and public policy. For the past five years, he has been a driving force against scope of practice expansion for non-physician providers which would compromise evidence-based, high-quality care for the health of the public and especially rural, at-risk populations. As recently as this year, he played a pivotal role in defeating independent practice for physician assistants in South Dakota. Despite the increased health care needs brought into focus by the Covid-19 pandemic, Dr. Allison continues to attack the myth that non-physician providers are the solution to the limited access to care that faces the American health care system.

Having witnessed first-hand the changing demographics of rural areas, which have become more racially and culturally diverse, older, and more reliant on government-sponsored insurance options, Dr. Allison has been steadfast in his work to improve the health of his community. His approach to this mission recognizes that the house of medicine cannot solve public health problems alone and must address them through working with other stakeholders, including local businesses and other community organizations not typically identified as public health advocates.

Personal statement

“My long career in organized medicine has always been grounded on the principles of doing what is best for patients and the practice of medicine. As a member of the Council on Science and Public Health, I will give the AMA a powerful voice from rural America as we focus on health equity for rural patients and other communities which have been historically marginalized and disproportionately burdened with the many public health problems we face today.”
Very early in her career as a small-town family physician in Wisconsin, Joanna Bisgrove, MD, realized how deeply her specialty is tied to public health. In addition to her busy community practice, her community sought her expertise, appointing her medical advisor of the local school district. During her tenure, Joanna served on numerous school and community health committees, updated district policy on both tobacco use and bullying, taught sexual health to high school sophomores, adolescent wellness to community families, and helped guide the district from the early days of the pandemic. Additionally, she often collaborated with her state specialty and medical societies to pursue sound public health policy, testified frequently in front of the Wisconsin Legislature and worked with legislative staff to craft legislation.

A third-generation physician, Joanna started her journey towards medicine at Cornell University. As a dean's scholar in the School of Engineering, she learned evidence-based problem-solving skills that she still uses to this day. She returned to her hometown of Chicago, working first as a medical research coordinator before enrolling at Rush Medical College. To further her public health expertise, she is working towards an MPH through the University of Minnesota.

Last year, Rush made Joanna an offer she couldn’t refuse: a chance to return to her alma mater, help launch its family medicine residency, and join Rush’s work on Chicago’s west side. Her expertise led the Illinois Medical Professionals Action Collaborative Team, or IMPACT, to recruit her, and she was recently appointed to an ACGME diversity task force. She also now works with Chicago based The Trotter Project to develop a garden-based nutrition curriculum for the students and families they serve.

Joanna’s AMA involvement began as AAFP delegate to the AMA Young Physicians Section; her leadership contributions grew to include the AMA Women Physicians Section Governing Council, of which she is vice-chair, and reference committees, including chair of Ref Com E. Joanna’s years of hands-on work as a community physician have led to a deep admiration for all that the AMA Council on Science and Public Health does to guide AMA policy to protect and support our communities, give physicians the tools to help patients sort fact from fiction and help the nation build a stronger and more resilient public health system.

The American Academy of Family Physicians is proud to nominate Joanna for a seat on the AMA Council on Science and Public Health and invites you to join the Illinois State Medical Society, Wisconsin Medical Society, Specialty and Service Society, and the AMA Young Physicians Section in supporting her candidacy. Joanna is a physician primed and passionate to help tackle the critical issues coming before CSAPH and who understands the need for data-driven technologic approaches to do so.

**Personal statement**

“I was born with hearing loss, and I use bilateral hearing aids plus an amplified stethoscope. I have seen through the years how medical innovation and access to care impacts people’s lives because of how they impacted my own. It’s a reminder how important it is for me to listen to all perspectives when seeking to collaborate in the name of health.”
The Medical Society of the State of New York (MSSNY) and its delegation to the AMA proudly nominate Joshua M. Cohen, MD, MPH, for the AMA Council on Science and Public Health. His nomination is also enthusiastically endorsed by the American Academy of Neurology (AAN), the Neuroscience Caucus, the Neurology Section Council, GLMA, the LGBTQ Health Section Council, and the AMA Young Physicians Section.

Our AMA’s action throughout the COVID-19 pandemic has publicly emphasized the critical role we play in public health crises. As physician leaders, we provided knowledge and resources to navigate the uncertainty of a public health crisis. We worked to improve the telemedicine infrastructure so our patients continued to have access to the care they need. We worked to address supply chain issues so that physicians could obtain PPE and other equipment necessary to provide safe patient care. However, we will face challenges as we move beyond the pandemic. The cost of practicing medicine has increased, reliable internet service is still a barrier for some patients to access telemedicine, and the fault lines in our public health system have become all too apparent. And we can’t anticipate when or what the next public health crisis might be and thus how to best prepare for it.

Yet, for our AMA, addressing public health crises is part of our DNA. We stand on the front lines against the opioid epidemic, the inequities of health care disparities, and the tragedy of gun violence. Working to improve public health is also in my DNA. That’s why I took a year off in medical school to study public health. Since then, I have worked to improve health in vulnerable communities through leadership in charitable organizations and community advocacy. This passion drove me to serve as co-chair of The Trevor Project NextGen, where I provided suicide prevention services to LGBTQ youth. Similarly, I have spent my time on the AMA Foundation Board of Directors working to advance public health, particularly around issues of health equity. We embarked on an ambitious strategic plan to fundamentally change our program portfolio to have greater impact on our communities. Our new program portfolio works to achieve health equity through our Community Health Program in underserved communities, our Underrepresented in Medicine scholarship with pull through at our Leadership Development Institute, and our National LGBTQ Fellowship Program.

When the deadly mass shooting at Pulse nightclub happened while our AMA House of Delegates was in session, I authored an emergency resolution and built a coalition of support to declare gun violence a public health crisis requiring a comprehensive public health solution, and that passed our House of Delegates with overwhelming support. As commissioner of public health for MSSNY, I worked to broaden access to vaccination, ultimately achieving New York state law in support of our MSSNY policy.

With your help, I can bring my legacy of public health action and leadership to our AMA Council on Science and Public Health and serve this House and our AMA in policy creation that will improve the health of our communities. My name is Joshua Cohen, and I humbly ask for your vote.
Patrick P. Coll, MD

Patrick P. Coll, MD, AGSF, CMD, is endorsed by the American Geriatrics Society (AGS), a nationwide, not-for-profit society comprised of nearly 6,000 geriatrics health care professionals working to improve the health, independence, and quality of life of older people.

Born in Ireland, Dr. Coll went to medical school at Trinity College, Dublin, graduating in 1981. He came to the United States in the summer of 1983 when he began a family medicine residency at the University of Connecticut Health Center (UCHC). Graduating in 1986, he became the first fellow in geriatric medicine at UCHC. Following his fellowship, he completed additional geriatrics training the United Kingdom before returning to the United States to join the faculty of the School of Medicine at UCHC. Dr. Coll undertook an expansion of clinical programs in geriatrics at UCHC, growing from a small clinical operation, which was only open three days a week with three geriatrics clinicians, to the current large multicenter program with 13 clinicians.

Dr. Coll is presently professor of family medicine and medicine, medical director for senior health, and clinical chief for geriatrics at UCHC. In his roles, he oversees efforts to improve and assess the quality of care provided to older adults and assists with the development and assessment of value-based health programs for older adults. He is a strong advocate for teaching future healthcare providers the principles of high-quality care for older adults.

Dr. Coll has more than 30 years of experience across the spectrum of care, including acute care, ambulatory care, post-acute care, long-term care, home care, and medical office locations. He has written and spoken extensively on healthy aging topics related to disease prevention and health promotion for older adults and edited a textbook on healthy aging. He has given presentations to the Connecticut Bar Association and the Connecticut Bar Foundation on medical and legal concerns of patients with cognitive impairment. Dr. Coll also has firsthand experience leading efforts to prevent the introduction and spread of COVID-19 and caring for patients with COVID-19, adapting to a rapidly changing situation. This has only furthered his commitment to disease prevention and public health.

Dr. Coll is a member of the senior appointments and promotions committee at UCHC and serves on the board of directors for the Sedgwick Cedars Residential Care Home. He is an active member and fellow of the AGS and has served on several committees and as a member of the board of directors. He is a member of the American Medical Directors Association and is a certified medical director (CMD). Dr. Coll is currently working on an initiative to update Medicare annual wellness visits to better meet the needs of older Medicare beneficiaries. He is listed in “The Best Doctors in America” and has been honored on numerous occasions including being one of the “Best Geriatric Medicine Specialists in Connecticut.”

Dr. Coll is interested in helping the AMA and its members promote and provide high-quality care for all Americans. He believes that taken together, his clinical and academic experience will allow him to be a valuable member of the AMA Council on Science and Public Health.
The American Association of Public Health Physicians (AAPHP) is proud to nominate Dave Cundiff, MD, MPH, for our AMA Council on Science and Public Health.

Dr. Cundiff is board certified in public health and general preventive medicine. He has been an AMA member since 1990 and has provided AAPHP testimony at the House of Delegates since 1997.

Dr. Cundiff has had leadership roles as a state public health official in New Jersey and Indiana, and as a local public health officer in Arizona, Kentucky, and Washington State. He served for 12 years as a trustee of Thurston-Mason County (Washington) Medical Society, and as that society’s delegate to Washington State Medical Association, before moving with his wife in 2018 to the small city of Ilwaco, Wash. He has worked in Indian health, veterans affairs, community health centers, private practice, and other settings.

After his work as co-chair of AAPHP’s Tobacco Control Task Force, Dr. Cundiff was elected to AAPHP’s Executive Committee in 1998 as president-elect, then as president for 2000–2002.

Since his presidential term, Dr. Cundiff has served AAPHP continuously in teaching, leadership, and support roles. He has been AAPHP’s AMA delegation leader from 2015 to the present, with 100% attendance at House proceedings.

Dr. Cundiff recently earned a second board certification in addiction medicine. He serves as medical director and lead physician at two recovery facilities in Southwest Washington. He is also co-founder of an integrated care clinic that will combine behavioral health, primary care, and other services in Ilwaco. He serves on the Ilwaco City Council, does lots of CME, volunteers in his church and community, and is re-learning Spanish.

Dr. Cundiff is endorsed by the PacWest Conference, by the Specialty and Service Society, and by the Section Council on Preventive Medicine. As a member of the AMA Council on Science and Public Health, Dr. Cundiff will serve the entire house of medicine as faithfully as he has served his specialty, counties, and states over the years.

Personal statement
“You know me as an advocate for Public Health. In testimony, in service, and in leadership, I am passionate about public service and about the values of our wonderful profession.

“Our AMA constantly advocates for physicians, and for all Americans. Our AMA’s work for Public Health gives perspective and credibility to everything else we do.

“The pandemic has illuminated our nation’s needs for preparation, for equity, for Public Health infrastructure, and for sacrifice in service of the common good.

“In the future, our AMA’s voice will be needed in ways we could scarcely imagine in 2019. It will be vital to include Public Health perspectives throughout this process.

“I will bring my diverse experiences to the Council: urban and rural, public and private, patient care and administration, and service to communities of diverse racial, ethnic, and economic makeup.

“I ask for your vote so that I can help make our AMA’s voice stronger, wiser, and more effective through service on our Council on Science and Public Health. Thank you!”
Padmini Ranasinghe, MD, MBBS, MPH

During the past four years Padmini actively contributed to the work of our AMA Council on Science and Public Health by drawing on her extensive background as a practicing clinician, medical educator, and public health, global health researcher. Padmini is grateful for the opportunity and requests your support for her continued work on the AMA Council on Science and Public Health.

Nominated by MedChi, The Maryland State Medical Society, and the Maryland Delegation to our AMA, her re-election is endorsed by American College of Physicians, AMA-IMG Section, Section Council on Preventative Medicine, Southeastern Delegation, and Johns Hopkins Medical Staff and AMA Student Chapter.

Padmini graduated from Colombo Medical School in Sri Lanka and completed a combined residency in internal medicine/preventive medicine at Yale University, while earning an MPH focusing on chronic diseases epidemiology and working in federally qualified health clinic. She joined the AMA 20 years ago as a resident and became active after receiving the 2007 AMA Foundation Excellence in Medicine Leadership award. She served twice on the IMG Section Governing Council, including as section chair. She also served as delegate to the AMA-yps and AMA-OMSS and is involved with the AMA Academic Physicians Section, the AMA Women Physicians Section, and the Section Council on Preventive Medicine. Padmini currently is the treasurer and vice speaker of the House of MedChi. She has served as president of Baltimore City Medical Society, is active with American College of Preventive Medicine and American College of Physicians, and is a member of the WHO Committee on Chronic Disease Prevention for Europe.

An assistant professor of medicine at Johns Hopkins, Padmini was inducted by medical students to its Distinguished Teachers Society, and relishes mentoring students and residents. Her research focuses on post-disaster mental health, and medical student and physician wellbeing. As a clinician living in Baltimore for over 15 years, she sees the diverse and vulnerable populations of the city impacted by social determinants of health. Experience with vastly different segments of health care in America makes Padmini better prepared for the work on the Council.

During the pandemic when scientific evidence was unclear on many fronts, some members of the public raised concerns and challenged medical expertise. Our AMA plays a major role bringing attention to the best science and policy options for all stakeholders, and the AMA Council on Science and Public Health’s work is vital to informing our HOD to chart the best course for our future. As a clinician, educator, and researcher with experience in global health and clinical informatics, Padmini is an effective advocate on behalf of the physicians.

Personal statement

“The recent Pandemic challenged us physicians and healthcare systems like never before. Science is a dynamic process, and conflicting information undermines public trust in medical expertise. We can work together as physicians to ensure that our collective decisions follow the best Science during a time when external factors including advanced technology is changing American healthcare. I want to help our AMA pursue this mission through CSAPH work, and I sincerely seek your vote for re-election.”