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**2012  
Membership  
Directory**

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**American Academy of Facial Plastic and Reconstructive Surgery  
and the  
Educational and Research Foundation for the  
American Academy of Facial Plastic and Reconstructive Surgery**

Additional copies of the directory are available to AAFPRS members at \$30.00 each and to non-member surgeons at \$75.00. The charge to all others is \$300.00.

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*The 2012 Membership Directory distinguishes AAFPRS programs, products, and services from that of the AAFPRS Foundation. The AAFPRS Foundation section is printed on light gray paper and the OFPSA is printed on darker gray.*

## President's Report

I am immensely honored and privileged to accept this gavel symbolizing the presidency of our Academy. Before looking ahead to what I believe will be an exciting and productive year, I'd like to acknowledge a few of the many past leaders who have influenced and guided me, as well as our specialty. Leaders like M. Eugene Tardy, Jr., MD, and Calvin M. Johnson, Jr., MD, who were among my early teachers and role models, and Ted A. Cook, MD, who I was fortunate to have as my fellowship preceptor and proud to have as my practice partner and close personal friend.

More recently, I applaud Daniel E. Rouso, MD, and Jonathan M. Sykes, MD, as they skillfully guided the Academy through a combination of their dedication and hard work. I am fortunate to be able to work with them and follow them as leaders.

And, of course, I could never have gotten here without my loving and supportive wife, Alisha, by my side.

As we look forward to the goals and challenges in front of us, we cannot forget the past hurdles we have had to overcome to arrive where we are today. The history of our Academy has been one of surmounting obstacles; and, in prevailing through this process, the AAFPRS has achieved its deserved recognition of global excellence.

We have much to be proud of today. Our fellowship and educational programs serve as standards for other organizations. Our certification process through the ABFPRS, celebrating its 25th anniversary this year, maintains the benchmark of clinical excellence of our diplomates. Our financial health has been stable, even during the recent economic downturn.

Many challenges remain, and we must be ready to deal with them effectively in order to continue to thrive. Toward this end, I have a number of goals and objectives to share with you for the upcoming year.

One of the key components of being president is serving as spokesperson for the Academy. I will be an active advocate of our members, with the help of our public relations firm, the Green Room. I will convey the message of our expertise and excellence in the specialty of facial plastic surgery. These traits are derived from our advanced training and the high quality of our educational endeavors. This message will be brought to the medical community, the media, and the public so that we may protect, promote, and advance the rights of our members.

Speaking of members, having a strong membership is the life blood of our Academy. Sustaining and expanding our membership is crucial to improving the strength and effectiveness of the AAFPRS. As an organization, we will be carefully listening to the needs and desires of our membership. We need to continue to develop programs and services to better serve our current members and attract new ones. In this regard, we need to maintain strong efforts to generate interest among resident members.

One of my main goals this next year is to increase new member enrollment in our organization. There is no question the vast majority of our membership is derived from residents graduating from otolaryngology-head and neck surgery programs from around the country. While our meetings and courses are open to all of them, many residents find it hard to attend due to time constraints and limited overlap with the main

otolaryngology meetings. Our bridge day activities and the popular Essentials Course, chaired by Stephen S. Park, MD, have been helpful in getting our message out to interested residents. But, we are only reaching a fraction of them.

One of the meetings boasting the highest resident attendance is the Combined Otolaryngology Spring Meeting (COSM). We have not had a presence there since 2005. There were valid reasons for the AAFPRS to leave COSM at that time. However, those reasons, mainly financial, appear to have been resolved. Accordingly, I have strongly supported our Board's recent decision to return to COSM, on a two-year trial basis, starting next spring. I have appointed Scott A. Tatum, MD, and Ben Marcus, MD, as meeting co-directors and they are well along with crafting a program designed to highlight our specialty and entice resident interest and participation.

Education remains one of the primary pillars of our organization. Since the founding of the AAFPRS 47 years ago, the Academy has created the highest quality in educational programs designed to teach excellence to our members. This tradition of educational excellence has continued under the capable direction of our current vice president for education, John L. Frodel, Jr., MD. Just during this past year, we've had both of our flagship courses, the Rejuvenation of the Aging Face meeting in San Diego in January, chaired by Vito C. Quatela, MD; Mary Lynn Moran, MD; and David W. Kim, MD, and the Advances in Rhinoplasty course held in Chicago in May, under the direction of Stephen W. Perkins, MD; Dr. Park; and Minas Constantinides, MD. Both meetings showcased diverse and multi-disciplinary faculties and both were successful in attracting large numbers of domestic and international attendees. Of course, this current Fall Meeting here in San Francisco has been another outstanding example of educational excellence. I'd like to congratulate and thank our meeting co-directors Steven J. Pearlman, MD, and Richard E. Davis, MD, for their wonderful program and organization.

Looking ahead, we will be back in San Diego for the 2012 Rejuvenation of the Aging Face, chaired by Dr. Moran and Sam P. Most, MD, again with the always sold-out cadaver dissection workshop to augment the panels and didactic presentations. And, as I mentioned, our return to the COSM is in April of next year, also being held in San Diego.

While I have no doubt the courses I have just outlined will be world-class, our challenge moving forward is to create new educational opportunities for our members. As an example, we have recently added on-line instructional videos available via our Web site. A goal of my presidency is to broaden the array of educational options available for Web-based learning for our members. This will include additional instructional video content along with on-line lectures and panel discussions from our meetings and courses. I will also join efforts with the ABFPRS toward creation of an effective on-line mechanism for our members to prepare and fulfill their Maintenance of Certification (MOC) requirements.

Another aspect of our education is our superb fellowship training program. Our fellowship structure is a peer-reviewed process ensuring strict standards of excellence which are second to none. Our fellowship graduates deserve recognition by all

licensing bodies for their expertise in facial plastic surgery, but that has not always been the case. This year, we will specifically revisit the value of Accreditation Council for Graduate Medical Education (ACGME) accreditation of our fellowships. Our ultimate goal is global recognition and acceptance of our qualifications. There is no question this process is more akin to a marathon and not a sprint. Through this important process, we will not lose sight of the fact that we are facial plastic surgeons, first and foremost.

We will also continue to reach out to our international colleagues and encourage their collaboration and contribution with our organization, as many have already, evidenced by their attendance at this meeting. We have implemented the International Observership program, which allows international members to spend time observing surgery from a list of designated, expert facial plastic surgeons. This program is administered by the International Federation of Facial Plastic Surgery Societies (IFFPSS) in conjunction with the AAFPRS, and will strengthen the already close bonds between our two organizations. I look forward to working with Wayne Larrabee, MD; Roxana Cobo, MD; and the leadership of the International Federation.

I'd like to call attention to a very special 7th Congress of the IFFPSS, which takes place in Rome, Italy, in May 2012. This event is co-sponsored by the AAFPRS along with the IFFPSS and the European Academy of Facial Plastic Surgery (EAFPS). It is under the direction of Pietro Palma, MD, who is president of the 7th Congress and of the EAFPS. Being as familiar as I am with Pietro's superb organizational expertise, this event promises to offer extraordinary educational, social, and cultural exchanges on a global scale. I urge everyone to attend.

Another goal of mine is to sustain and expand upon the effort initiated by Dr. Sykes and Peter A. Hilger, MD, and others, toward integrating evidence-based medicine (EBM) into all aspects of facial plastic surgery. Upon their recommendation, I have just appointed Lisa Ishii, MD, as the new chair of the EBM Committee. Under her guidance, this committee will help institute Web-based EBM education, promote evidence-based methodology in our fellowship training and research protocols, and develop other strategies to help us transition from anecdotal experience to evidence-based outcomes.

Another pillar of our AAFPRS Foundation is our humanitarian efforts via the FACE TO FACE program. Since our first mission to Yekaterinburg, Russia in 1992, a trip that I was fortunate to have participated in, FACE TO FACE has expanded to meet growing needs. It now encompasses not only international cleft and craniofacial missions, but also provides care for domestic violence victims, and, most recently, treatment for veterans injured in the line of duty via the FACES OF HONOR program, started by Donn R. Chatham, MD. FACE TO FACE programs allow our members to share their experience and expertise with the world. In return, we derive not only the good will and personal satisfaction from having helped those in need, but also a strong reminder to all of us that we are responding to a higher calling, that of being a physician and a healer. My goal as president will be to expand our humanitarian efforts both in terms of financial support and organizational capacity.

This brings me to the capital campaign. A long-term goal of mine, and many others, continues to be the financial stability of our Academy. The Many Faces of Generosity capital campaign,

successfully launched at this Fall Meeting, is an investment in our collective future. Completion of this campaign will help generate the endowment needed to carry out the AAFPRS Foundation's core mission of "improving lives through education, research, and humanitarian programs."

The new face of education will be a Web portal making available a multitude of on-line resources and education tools. This will allow members both flexibility and access to content. In addition, this endowment will allow Continuing Medical Education (CME) programs and educational resources to be fiscally independent, while allowing members to keep abreast of the rapid advances in our specialty. This is particularly vital during current times of decreasing income from membership dues and weakened industry support for CME activities.

Our Foundation already awards significant funds to AAFPRS members performing exemplary research. The capital campaign endowment will allow the establishment of a Facial Plastic Surgery Research Center to educate surgeons on the process and techniques of conducting quality research. It will also expand funding to support essential research and evidence-based studies necessary to advance the knowledge frontier for our specialty.

With regard to humanitarian programs, this endowment will allow recruitment of a dedicated coordinator to assist in expansion of the already well-established three branches of FACE TO FACE. The coordinator will also help us increase public awareness of the programs and establish development funding sources for these programs to become financially self-sustaining over time.

These goals are laudable, attainable, and worthy of support from each and every one of us. After all, we are investing in ourselves and our future.

I think this is an exciting time for facial plastic surgery and a special time to be a facial plastic surgeon. Our group has successfully overcome numerous past obstacles and is on the verge of reaching the next level in our evolution as an organization and as a specialty. I am proud to represent all of us and I pledge to work diligently toward achieving our common goals.

We have a bright future ahead. As president, I am grateful to have the able assistance of our dedicated executive vice president, Mr. Steve Duffy, our astute legal counsel, Mr. Tom Rhodes, our devoted and efficient Academy staff, and our experienced and decisive Board of Directors to help us achieve our goals. Most importantly, I am counting on each and every one of you for your generous support and involvement to help us ensure our continued success and secure our bright future.

Thank you very much for this opportunity.



Tom D. Wang, MD  
President 2011-2012  
American Academy of Facial Plastic and Reconstructive Surgery and the  
Educational and Research Foundation for the American  
Academy of Facial Plastic and Reconstructive Surgery

## Immediate Past President's Report

On a recent transatlantic flight to Turkey, I was tired and wanted to get some sleep. I performed my long flight routine... I removed my contact lenses, took an Ambien, eventually took off my glasses, and put my noise reduction headphones on. My cocoon drew closer; my myopia manifested. I began to think about my life, my career in medicine and facial plastic surgery, and this past year. I drank a little wine. My vision blurred slightly, but my thoughts became clearer.

Why did I want to become president of the AAFPRS? The job is outside of my comfort zone. By nature, I am not particularly organized. In fact, our executive vice president Steve Duffy sat me down before the year started and said, "Make sure that you remember to answer me when I call or write!" Organization wasn't a particularly strong suit of mine; hard work was. Some would say I was already too busy with my existing life. Maybe I have adult ADHD. And adding Academy president? Did I have what it takes to be an effective leader? Could I focus enough to do a good job? Frankly, at times, I had self-doubts.

Last year, as I looked forward to my year as president, I thought of focusing on goals that would benefit the overall Academy. We already possessed the best educational programs in facial plastic surgery in the world and had an outstanding fellowship program. What new programs did we need to institute, and what existing programs could we improve? In my opinion, our Academy needed to improve our position in performing facial plastic surgery research, both as individuals and as an Academy. I also wanted our Academy to become more active in humanitarian activities. This is our way to give back something to the world. Humanitarian mission trips avoid the negative aspects, which often invade our daily practice of medicine and make us again keenly aware of why we chose medicine. In order to accomplish the goal of a more recognized humanitarian program, the AAFPRS needed a long-range, comprehensive plan and the funds to institute the plan. Lastly, I felt that our relations with other plastic surgery specialty societies could improve, and I wanted a mechanism to continue the process of improved interspecialty relations.

During the past year, we have accomplished many things as an Academy. An Evidence Based Medicine (EBM) Committee was established, under the able leadership of chair Peter A. Hilger, MD, with the overall goal to integrate EBM into the collective Academy culture. This committee's efforts have resulted in educational courses on EBM, which are occurring at this meeting—a plenary session panel here on Saturday—and the beginning of infusion of these principles into our journal articles and onto the podium. Additionally, the EBM Committee has created a series of article requisites for all fellows and fellowship directors that is accompanied by related questions. Initially, incorporation of EBM principles seems tedious, burdensome, and even unnecessary. All change is painful on some level. However, it is a necessity that the principles of EBM be accepted by all plastic surgery organizations in order to elevate the quality of care and improve outcomes of our patients, and to ensure their safety.

For many years, facial plastic surgeons have performed techniques based on intuition, rather than science. Although the anecdotal words and teachings of our experienced mentors will always be important, scientific and validated proof of our

outcomes is essential. Even though the intentions of surgeons are the best outcomes in the safest manner, the surgical results are rarely looked at with much scientific rigor. The incorporation of EBM into facial plastic surgery requires a culture change that must begin with our leadership and educators, and continue to all physicians and related health care personnel. We have started a process in the AAFPRS designed to integrate the principles of EBM into our fellowship training programs, our journal articles, our courses, and our collective thinking process. The design and full implementation of these efforts will take several years. In the future, we will hopefully grade the level of evidence of all presentations at meetings and all published peer-review articles. This process will make us better facial plastic surgeons and better doctors. It will enable us to ask better scientific questions, and design studies to answer these questions. Only then can we educate the public about the value of legitimate evidence in protecting their safety and providing them with the highest quality of care.

Another goal of mine during the past year was to continue to improve our relationship with other plastic surgery societies. Past leadership did the heavy lifting regarding the relationship building with plastic surgery; I only had to continue holding the olive branch. Working together with a society whose members have openly criticized you in the past is not simple, and requires that individuals put aside past differences. However, in order to affect change, we must want to change our attitudes and openness to working together.

The recognition thrust upon the AAFPRS and its members is well deserved. It has resulted from many years of hard work and excellence in patient care and education. We have world class educational programs and have expanded the template for facial plastic surgery in the United States and around the world. This is certainly evidenced by the outstanding Fall Meeting program organized by co-chairs Steven J. Pearlman, MD, and Richard E. Davis, MD. The respect given by plastic surgery (ASAPS) to the AAFPRS and its members is a product of this outstanding work and of our collaborative efforts with them on several recent projects. Members of the AAFPRS have worked together with ASAPS members on EBM, injectable safety (PCIS), the Physicians Aesthetic Coalition (PAC), and on assessing the existing literature and gaps in knowledge on injectable fillers. At the AAFPRS Aging Face meeting and the annual ASAPS meeting within the next year, leadership delegations from the non-hosting society will attend the hosts' meeting. As a result of these joint efforts on the part of leadership, the longtime rule preventing AAFPRS members from attending ASAPS meetings will likely be changed.

The AAFPRS and the ASAPS have been rivals over the years and the rivalry is to be expected. The competition is the result of personal egos that are common among plastic surgeons and a natural adversarial relationship when economic turf is at stake. Despite the fact that the leadership between ASAPS and the AAFPRS are working together on several joint projects, many members on a local level may wonder whether these efforts have important meaning and whether the leadership initiatives trickle down to the grassroots. For me, collaboration is always best. At the core of both the AAFPRS and ASAPS is to promote the highest quality of plastic surgery (and facial

plastic surgery) through education and training. No specialty has a monopoly on knowledge. Cross fertilization of knowledge and sharing from our divergent backgrounds can only be positive for both organizations. It is, of course, important to always protect the interests of the AAFPRS members and to defend our education and training. It is my hope that the collaboration displayed by leadership remains earnest and there is a culture change that allows the respective memberships to realize that fighting between specialties is pointless, and does nothing to advance patient care or safety.

During my incoming address last year, another important goal of mine was to improve our Academy's financial stability. In order to confront our future in any matter, we need to be aware of our past shortcomings. Recent history of the AAFPRS suggests that our financial reserves in the early 2000s had dwindled. A significant decrease in our reserves potentially threatens our viability and impacts our ability to carry out our mission-educational programs, advocacy, and marketing of our specialty. Difficult economic conditions caused a reduction in membership and a decrease in our investment portfolio.

Should we begin another Capital Campaign to improve our financial situation? The vision of Vito C. Quatela, MD, and many others within AAFPRS leadership was that although economic times are presently less than ideal, the country is emerging from the economic cloud that hovered over us from 2007-2011. For this reason, a collective decision was made to initiate a Capital Campaign at this Fall Meeting 2011.

The Capital Campaign will ensure our viability and safeguard our future. The goals of the campaign are to provide funds to upgrade our educational programs, allow evidence-based research within the AAFPRS to improve patient outcomes and safety, and to advance our humanitarian program (FACE TO FACE). The AAFPRS on-site courses are already first-rate, but financial resources are required to expand Web-based portals for education and other on-line educational opportunities for members. Our FACE TO FACE humanitarian program is already composed of caring, empathetic members. However, it lacks the personnel and funding to carry it to the next level—a financially self-sustaining portion of our organization that has national and international recognition. In order to achieve this recognition, FACE TO FACE must have the financial resources required to create name recognition and international prominence. Additional monies will allow the AAFPRS to create a research entity that performs independent, evidence-based studies that impact our treatment algorithms and create value to industry. Most importantly, the funds created by this Capital Campaign will protect the AAFPRS from the economic rollercoaster that is beyond the control of its members. This will guarantee that we are able to continue to perform the functions of education, advocacy, and protection of our board certification.

The future of the AAFPRS is bright. The beginning of the Capital Campaign makes me believe that our goal of \$4 million in the next five years is easily attainable. We have involved members who care about their work and about this organization. In most cases, they are able to put aside their personal goals for the good of an organization that has provided all of us with education (in a field about which we are passionate) and has protected our board certification with zeal and vigor. I have gotten to work closely on a daily basis with

our executive vice president Steve Duffy and his staff. I greatly admire and respect Steve and the loyalty that he has for the AAFPRS and its core values. As an Academy, we are also fortunate to have the sage wisdom of Tom Rhodes, Esq., who serves not only as our legal counsel, but also acts as a voice of reason and moral compass for our membership. He has been instrumental in protecting and maintaining the status of our board certification. I truly thank Steve, Tom, and the entire AAFPRS staff for everything they do for our Academy, and for making my job easier this year.

The early morning light seeped into the plane as we prepared to land. During the flight, my thoughts about this year crystallized. I thought of the many leaders that had served during the 47 years of this organization—M. Eugene Tardy, Jr., MD; Ted A. Cook, MD; Fred J. Stucker, MD; Robert L. Simons, MD; E. Gaylon McCollough, MD; Wayne F. Larrabee, MD; Peter A. Adamson, MD; Shan R. Baker, MD; and many others. These are colleagues who I admire and who have shaped my actions and behavior. I thought of how each of these individuals have put aside personal goals to try to advance the AAFPRS. I realized that this is what leaders do.

Before this year, I have been a doer, a foot soldier, not a leader.

I feel proud to have followed in the footsteps of the outstanding leaders that have shaped the AAFPRS. I am honored to be followed by my good friend and colleague, Tom D. Wang, MD, who will surely provide excellent leadership for our Academy.

This year has taught me about leadership. I feel humbled yet invigorated by my time as president, for this group of people—this family—that I have been honored to represent embodies the best of this profession.

For me, this Academy is about teaching, accountability, respect for past accomplishments, and knowledge of past prejudices. It is about caring to do the best job possible.

When I started in this Academy 26 years ago, I wanted to get involved. Today, I want to involve others. The early morning light seeped into the plane as we prepared to land. During the flight, my thoughts about this year crystallized. My myopia has lifted. The mission of the AAFPRS is to teach, to protect, and to visualize the future. The role of its leaders is to organize this effort.

The future is right in front of all of us. Our future is our young surgeons. We need to teach them, share with them, and respect them as they outperform us. They will soon be our leaders. Thank you very much.



Jonathan M. Sykes, MD  
President 2010-2011  
American Academy of Facial Plastic and Reconstructive Surgery and the  
Educational and Research Foundation for the American  
Academy of Facial Plastic and Reconstructive Surgery



## The AAFPRS

### American Academy of Facial Plastic and Reconstructive Surgery

#### ITS HISTORY

The American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) was founded in 1964 and represents more than 2,700 facial plastic and reconstructive surgeons throughout the world. The AAFPRS is a National Medical Specialty Society of the American Medical Association (AMA). The AAFPRS holds an official seat in the AMA House of Delegates and on the American College of Surgeons board of governors.

#### ITS MEMBERS

The majority of AAFPRS members and fellows are certified by the American Board of Otolaryngology-Head and Neck Surgery, which includes examination in facial plastic and reconstructive surgery procedures, and the American Board of Facial Plastic and Reconstructive Surgery. Other AAFPRS members are surgeons certified in ophthalmology, plastic surgery, and dermatology.

#### ITS PURPOSE

The AAFPRS was founded in 1964 as an autonomous professional society representing the specialty of facial plastic surgery. The mission of the AAFPRS is:

- To promote the highest quality facial plastic surgery through education, dissemination of professional information, and the establishment of professional standards;
- To achieve understanding and recognition of the specialty of facial plastic surgery by the medical profession, hospitals, and other medical care entities, legislative and regulatory bodies, and the public at large;
- To define facial plastic surgery as a specialty that requires intensive training and competence, embodies high ethical standards, artistic ideals, commitment to humanitarian service, and a desire to enhance the quality of human life;
- To serve as the public's information source on facial plastic surgery; and
- To assist members in the practice of facial plastic and reconstructive surgery, guiding them in the delivery of high quality, cost-effective medicine and surgery.

With over 2,700 members, the Academy is the world's largest international association of facial plastic surgeons and the only organization dedicated solely to the advancement of facial plastic and reconstructive surgery.

## AAFP RS Leadership and Committees 2011-2012

### EXECUTIVE COMMITTEE

*The year indicates the expiration of term as a board member.*

Tom D. Wang, MD, President (2013)  
 Jonathan M. Sykes, MD, Immediate Past President (2012)  
 Robert M. Kellman, MD President-elect (2014)  
 Stephen S. Park, MD, Secretary (2013)  
 Paul J. Carniol, MD, Treasurer (2013)  
 Edwin F. Williams, III, MD, Group VP for Public and Regulatory  
 Affairs (2014)  
 John L. Frodel, Jr., MD, Group VP for Education (2012)\*+  
 Minas Constantinides, MD, Group VP for Research, Awards and  
 Development (2012)\*+  
 Mary Lynn Moran, MD, Group VP for Membership and Society  
 Relations (2013)  
 Fred G. Fedok, MD, Group VP-elect for Education (2015)\*+  
 Craig S. Murakami, MD, Group VP-elect for Research,  
 Development, and Humanitarian Programs (2015)\*+  
 Stephen C. Duffy, Executive Vice President  
 \* Ex-officio member of the Executive Committee  
 + Non-voting member of the Executive Committee

### BOARD OF DIRECTORS

*The Board also includes all those listed under the Executive Committee.*

Scott A. Tatum III, MD, Director-at-Large (2013)  
 David A. Sherris, MD, Eastern Regional Director (2013)  
 Sam P. Most, MD, Western Regional Director (2013)  
 Harvey D. Strecker, MD, Canadian Regional Director (2014)  
 Richard E. Davis, MD, Southern Regional Director (2014)  
 J. David Kriet, MD, Midwestern Regional Director (2014)  
 Grant S. Hamilton, MD, Young Physician Representative (2014)

### PAST PRESIDENTS

Jonathan M. Sykes, MD .....2010  
 Daniel E. Rousso, MD .....2009  
 Donn R. Chatham, MD ..... 2008  
 Vito C. Quatela, MD ..... 2007  
 Peter A. Hilger, MD ..... 2006  
 Ira D. Papel, MD ..... 2005  
 Steven J. Pearlman, MD ..... 2004  
 Keith A. LaFerriere, MD ..... 2003  
 Dean M. Toriumi, MD ..... 2002  
 Shan R. Baker, MD ..... 2001  
 Russell W.H. Kridel, MD ..... 2000  
 Devinder S. Mangat, MD ..... 1999  
 Stephen W. Perkins, MD .....1998  
 G. Richard Holt, MD ..... 1997  
 Peter A. Adamson, MD ..... 1996  
 Wayne F. Larrabee, Jr., MD .....1995  
 Roger L. Crumley, MD ..... 1994  
 H. George Brennan, MD .....1993  
 J. Regan Thomas, MD .....1992  
 Fred J. Stucker, MD .....1991  
 Norman J. Pastorek, MD ..... 1990  
 Ted A. Cook, MD ..... 1989  
 Frank M. Kamer, MD .....1988  
 John R. Hilger, MD ..... 1987  
 E. Gaylon McCollough, MD ..... 1986  
 Robert L. Simons, MD ..... 1985  
 Richard L. Goode, MD ..... 1984  
 Howard W. Smith, MD, DMD .....1983  
 M. Eugene Tardy, Jr., MD ..... 1982  
 Charles J. Krause, MD .....1981  
 Sidney S. Feuerstein, MD .....1980  
 \*Jerome A. Hilger, MD .....1979  
 \*George A. Sisson, MD .....1978  
 Leslie Bernstein, MD, DDS ..... 1977  
 \*Richard C. Webster, MD .....1976  
 \*Carl N. Patterson, MD .....1975  
 \*Trent W. Smith, MD .....1974  
 G. Jan Beekhuis, MD .....1973  
 Walter E. Berman, MD ..... 1972  
 \*Jack R. Anderson, MD .....1971  
 \*William K. Wright, MD ..... 1970  
 \*Ira Tresley, MD .....1969  
 \*Morey L. Parkes, MD .....1968  
 Richard T. Farrior, MD ..... 1967  
 \*John J. Conley, MD ..... 1966  
 \*John T. Dickinson, MD .....1965  
 \*Irving B. Goldman, MD ..... 1964  
 \*Deceased

## 2011-2012 ACADEMY COMMITTEES

*The year indicates expiration of term as committee members or chairs. The position noted after the committee name indicates the Board member who oversees that particular committee. Staff liaisons are noted after each committee roster.*

### AUDIT COMMITTEE

(Treasurer)

Paul J. Carniol, MD, Chair, 2013  
Steven M. Denenberg, MD, 2012  
Wm. Russell Ries, MD, 2013  
Ira D. Papel, MD, 2014  
Amy McFee, staff liaison

### CREDENTIALS COMMITTEE

(Secretary)

Mark Hamilton, MD, Chair, 2014  
Minas Constantinides, MD, 2012  
Kris Conrad, MD, 2013  
Mark M. Beaty, MD, 2015  
Craig S. Murakami, MD, 2016  
Maria Atkins, staff liaison

### EMERGING TRENDS AND TECHNOLOGIES COMMITTEE

(GVP for Public and Regulatory Affairs)

Andrew C. Campbell, MD, Chair, 2014  
Harry Mittelman, MD, Sr. Advisor  
Paul J. Carniol, MD, Sr. Advisor  
Jamil Asaria, MD, 2012  
J. Kevin Duplechain, MD, 2012  
Wayne P. Foster, MD, 2012  
Tang Ho, MD, 2012  
Edward S. Kwak, MD, 2012  
Phillip R. Langsdon, MD, 2012  
Paul L. Leong, MD, 2012  
Jason D. Meier, MD, 2012  
Harrison C. Putman, MD, 2012  
Daryoush Saadat, MD, 2012  
Anil R. Shah, MD, 2012  
Richard W. Westreich, MD, 2012  
Jen Y. Chow, MD, 2013  
Alex S. Donath, MD, 2013  
Robert A. Glasgold, MD, 2013  
Ryan M. Greene, MD, 2013  
Natalie P. Higgins, MD, 2013  
Jonathan Kolbersh MD, 2013  
Lily P. Love, MD, 2013  
Gregory W. Pippin, MD, 2013  
Chris Savage, MD, 2013  
Michael E. Villano, MD, 2013  
Anurag Agarwal, MD, 2014  
Rami K. Batniji, MD, 2014  
Mark M. Beaty, MD, 2014  
Michael J. Brenner, MD, 2014  
Robert W. Brobst, MD, 2014  
Perrin Clark, MD, 2014  
Payam Daneshrad, MD, 2014  
Jason S. Hamilton, MD, 2014  
Todd C. Hobgood, MD, 2014

Phillip D. Knott, MD, 2014  
Ritvik P. Mehta, MD, 2014  
Umang Mehta, MD, 2014  
Sachin Parikh, MD, 2014  
Amit B. Patel, MD, 2014  
Scott B. Roofe, MD, 2014  
Nima Shemirani, MD, 2014  
William "Matt" White, MD, 2014  
Hootan Zandifar, MD, 2014  
Rita Chua Magness, staff liaison

### ENDOWMENT INVESTMENT COMMITTEE (Treasurer)

Karl J. Eisbach, MD, Chair, 2012  
Harrison C. Putman, MD, Sr. Advisor  
Stuart H. Bentkover, MD, 2013  
Richard D. Gentile, MD, 2013  
Andrew A. Jacono, MD, 2014  
Benjamin W. Cilento, MD, 2014  
Amy McFee, staff liaison

### ETHICS COMMITTEE

(Immediate Past President)

Jonathan M. Sykes, MD, Chair (Past President) 2011  
Keith A. LaFerriere, MD (Past Pres.) 2012  
Steven J. Pearlman, MD (Past Pres.) 2012  
Matthew A. Kienstra, MD (Young Physician Chair) 2012  
Peter A. Adamson, MD (Past Pres.) 2012  
Paul S. Nassif, MD (PI Committee Chair) 2012  
J. David Kriet, MD (Fellow Member) 2014  
Richard E. Davis, MD (Board Member) 2014  
Mark Hamilton, MD (Credentials Chair) 2014  
Cynthia M. Gregg, MD (Fellow Member) 2012  
David A. Sherris, MD (Board Member) 2013  
Steve Duffy, staff liaison

### MEMBERSHIP/RESIDENCY RELATIONS COMMITTEE

(GVP for Membership and Society Relations)

Stephen A. Goldstein, MD, Chair, 2012  
Eugene L. Alford, MD, Sr. Advisor  
Craig L. Cupp, MD, Sr. Advisor  
Mimi S. Kokoska, MD, Sr. Advisor  
Babak Azizzadeh, MD, 2012  
Garrett H. Bennett, MD, 2012  
John B. Bitner, MD, 2012  
Jeffrey S. Chien, MD, 2012  
Kevin H. Ende, MD, 2012  
Curtis W. Gaball, MD, 2012  
Michael M. Kim, MD, 2012  
Robert Mounsey, MD, 2012  
Gary M. Petrus, MD, 2012  
Sumit Bapna, MD, 2013  
Michael G. Brandt, MD, 2013  
Randolph B. Capone, MD, 2013  
Mark A. Clymer, MD, 2013  
Fred G. Fedok, MD, 2013  
Matthew A. Kienstra, MD, 2013  
William D. Losquadro, MD, 2013  
Maureen A. Muecke, MD, 2013  
Nima Shemirani, MD, 2013  
David W. Stepnick, MD, 2013  
Andrew A. Winkler, MD, 2013  
Haresh Yalamanchili, MD, 2013  
Robert J. Chiu, MD, 2014  
Jeffrey J. Joseph, MD, 2014  
Kate McCarn, MD, 2014  
Scott Stephan, MD, 2014  
Maria Atkins, staff liaison

### MULTIMEDIA COMMITTEE

(GVP for Public and Regulatory Affairs)  
Stuart H. Bentkover, MD, Admin. Chair

### MULTIMEDIA COMMITTEE (EDITORIAL REVIEW SUBCOM.)

Edwin Williams, MD (GVP for Public and Reg. Affairs) 2014  
John L. Frodel, Jr., MD (GVP for Education) 2012  
Stephen A. Goldstein, MD (Membership Chair) 2012  
J. Randall Jordan, MD (Publications Chair) 2012  
Robert M. Kellman, MD (President-elect) 2012  
Jonathan M. Sykes, MD (Past Pres.) 2011  
David Reiter, MD, DMD (Medical Editor)  
Rita Chua Magness, staff liaison

**MULTIMEDIA COMMITTEE  
(ELECTRONIC MEDIA SUBCOM.)**

Louis M. DeJoseph, MD, Chair, 2013  
Jon Mendelsohn, MD, Sr. Advisor  
Babak Azizzadeh, MD, 2012  
Sumit Bapna, MD, 2012  
Wayne P. Foster, MD, 2012  
Curtis W. Gaball, MD, 2012  
Robert Mounsey, MD, 2012  
Paul Presti, MD, 2012  
Shepherd G. Pryor, MD, 2012  
Anil R. Shah, MD, 2012  
Jen Y. Chow, MD, 2013  
Natalie Higgins, MD, 2013  
Thomas T. Le, MD, 2013  
Amit B. Patel, MD, 2013  
Michael E. Villano, MD, 2013  
Mark M. Beaty, MD, 2014  
Robert W. Brobst, MD, 2014  
Gregory E. Davis, MD, 2014  
Anna Hsu, MD, 2014  
William D. Losquadro, MD, 2014  
Umang Mehta, MD, 2014  
Rita Chua Magness, staff liaison

**MULTIMEDIA COMMITTEE  
(PUBLICATIONS SUBCOMMITTEE)**

J. Randall Jordan, MD, Chair, 2012  
Terry L. Donat, MD, Sr. Advisor  
Richard D. Gentile, MD, Sr. Advisor  
Jim E. Gilmore, MD, Sr. Advisor  
Scott A. Tatum, III, MD, Sr. Advisor  
Ivan Wayne, MD, 2013  
Brian Downs, MD, 2014  
Grant S. Hamilton, MD, 2014  
Raffi Der Sarkissian, MD, 2014  
Rita Chua Magness, staff liaison

**MULTIMEDIA COMMITTEE  
(WORLD WIDE WEB SUBCOMMITTEE)**

Sam M. Lam, MD, Chair, 2012  
Andrew C. Campbell, MD, Sr. Advisor  
Philip J. Miller, MD, Sr. Advisor  
Garrett H. Bennett, MD, 2012  
Arim M. Karam, MD, 2012  
George T. Moynihan, MD, 2012  
Richard W. Westreich, MD, 2012  
Jen Y. Chow, MD, 2013  
Deirdre S. Leake, MD, 2013  
David Reiter, MD, DMD, 2013  
Prabhat K. Bhamra, MD, 2014  
Robert W. Brobst, MD, 2014  
Houtan Chaboki, MD, 2014  
Umang Mehta, MD, 2014  
James M. Ridgway, MD, 2014  
Konstantin Tarashansky, MD, 2014  
Rita Chua Magness, staff liaison

**NOMINATING COMMITTEE**

(Immediate Past President)  
Jonathan M. Sykes, MD, Chair, 2012  
Shan A. Baker, 2012  
Russell W. H. Kridel, MD, 2012  
Stephen S. Park, MD, 2012  
Edward E. Farrior, MD, 2013  
Peter A. Hilger, MD, 2013  
Craig S. Murakami, MD, 2013  
Sam P. Most, 2013  
David A. Sherris, MD, 2013  
Richard E. Davis, MD, 2014  
J. David Kriet, MD, 2014  
Harvey Strecker, MD, 2014  
Steve Duffy, staff liaison

**PATIENT SAFETY, QI, AND ACCREDI-  
TATION COMMITTEE**

(GVP for Public and Regulatory Affairs)  
Amir Moradi, MD, Chair, 2013  
Gerald G. Edds, MD, Sr. Advisor  
Neil A. Gordon, MD, Sr. Advisor  
Michael Armstrong, Jr., MD, 2012  
William H. Beeson, MD, 2012  
Michael J. Brenner, MD, 2012  
Robert J. Chiu, MD, 2012  
Steven H. Dayan, MD, 2012  
Richard D. Gentile, MD, 2012  
Seth M. Goldberg, MD, 2012  
Michael M. Kim, MD, 2012  
Mary Lynn Moran, MD, 2012  
Robert Mounsey, MD, 2012  
Seth A. Yellin, MD, 2012  
J. Charles Finn, MD, 2013  
Stephen S. Smith, MD, 2013  
Scott K. Thompson, MD, 2013  
James C. Alex, MD, 2014  
Roger A. Allcroft, MD, 2014  
Farhad Ardeshirpour, MD, 2014  
Amita A. Bagal, MD, 2014  
Eric J. Dobratz, MD, 2014  
Todd C. Hobgood, MD, 2014  
Stewart C. Little, MD, 2014  
James M. Pearson, MD, 2014  
Nima Shemirani, MD, 2014  
Konstantin Tarashansky, MD, 2014  
Steve Duffy, staff liaison

**PUBLIC INFORMATION COMMITTEE**  
(GVP for Public and Regulatory Affairs)

Paul S. Nassif, MD, Chair, 2012  
Mark M. Beaty, MD, Sr. Advisor  
Ronald J. Caniglia, MD, Sr. Advisor  
Michael Armstrong, Jr., MD, 2012  
Andrew A. Jacono, MD, 2012  
Edward S. Kwak, MD, 2012  
Paul Presti, MD, 2012

Sandeep D. Sule, MD, 2012  
Mark A. Clymer, MD, 2013  
Deirdre S. Leake, MD, 2013  
Gregory W. Pippin, MD, 2013  
Nima Shemirani, MD, 2013  
Kenneth C.Y. Yu, MD, 2013  
Anurag Agarwal, MD, 20114  
Stuart H. Bentkover, MD, 2014  
Andrew Burchard, MD, 2014  
Perrin Clark, MD, 2014  
Omar F. Husein, MD, 2014  
Jeffrey J. Joseph, MD, 2014  
Lee Anne Klausner, MD, 2014  
William Numa, MD, 2014  
Krishna G. Patel, MD, 2014  
Jeffrey D. Rawnsley, MD, 2014  
Benjamin Saltman, MD, 2014  
Taha Z. Shipchandler, MD, 2014  
Davud Sirjani, MD, 2014  
Sarmela Sunder, MD, 2014  
William Truswell, MD, 2014  
William E. Walsh, MD, 2014  
Rita Chua Magness, staff liaison

**REGULATORY AND SOCIOECONOMIC  
AFFAIRS COMMITTEE**

(GVP for Public and Regulatory Affairs)  
Roger C. Allcroft, MD, Chair, 2012  
Ross A. Clevens, MD, Sr. Advisor  
Mark J. Glasgold, MD, Sr. Advisor  
David Reiter, MD, DMD, Sr. Advisor  
Sam P. Most, MD (Ex-Officio, West  
Region), 2013  
David A. Sherris, MD (Ex-Officio,  
East Region), 2013  
Richard E. Davis, MD (Ex-Officio, South  
Region), 2014  
J. David Kriet, MD (Ex-Officio,  
Midwest Region), 2014  
Harvey Strecker, MD (Ex-Officio,  
Canada Region), 2014  
Michael J. Brenner, MD, 2012  
Edward D. Buckingham, MD, 2012  
Andrew C. Campbell, MD, 2012  
Jeffrey S. Chien, MD, 2012  
Robert J. Chiu, MD, 2012  
J. David Holcomb, MD, 2012  
Arim M. Karam, MD, 2012  
Phillip R. Langsdon, MD, 2012  
Benjamin C. Marcus, MD, 2012  
David V. Martini, MD, 2012  
Jason D. Meier, MD, 2012  
Seth A. Yellin, MD, 2012  
Mark A. Clymer, MD, 2013  
Stephen S. Smith, MD, 2013  
Ivan Wayne, MD, 2013

continued ...

Benjamin W. Cilento, MD, 2014  
 Robert DeFatta, MD, 2014  
 Todd C. Hobgood, MD, 2014  
 Andrea Jarchow, MD, 2014  
 Keith A. Marcus, MD, 2014  
 Giancarlo F. Zuliani, MD, 2014  
 Steve Duffy, staff liaison

**WOMEN IN FACIAL PLASTIC SURGERY  
 COMMITTEE (GVP for Membership  
 and Society Relations)**

Sydney Butts, MD, Chair, 2013  
 Theda C. Kontis, MD, Sr. Advisor  
 Deborah Watson, MD, Sr. Advisor  
 Donna J. Millay, MD, Sr. Advisor  
 Oneida A. Arosarena, MD, 2012  
 Jaimie DeRosa, MD, 2012  
 Kimberley Lee, MD, 2012  
 Linda Maxwell, MD, 2012  
 Laura Hetzler, MD, 2013  
 Lily P. Love, MD, 2013  
 Krishna G. Patel, MD, 2013  
 Kristin K. Egan, MD, 2014  
 Jill L. Hessler, MD, 2014  
 Lisa Ishii, MD, 2014  
 Robin W. Lindsay, MD, 2014  
 Kate McCarn, MD, 2014  
 Shari D. Reitzen, MD, 2014  
 Sarmela Sunder, MD 2014  
 Catherine P. Winslow, MD, 2014  
 Ann H. Jenne, staff liaison

**YOUNG PHYSICIANS COMMITTEE (GVP  
 for Membership and Society Relations)**

Matthew A. Kienstra, MD, Chair, 2012  
 Paul S. Nassif, MD, Sr. Advisor  
 David A. Sherris, MD, Sr. Advisor  
 Grant S. Hamilton, MD, Ex-officio,  
 YP Board Member, 2014  
 Sumit Bapna, MD, 2012  
 Garrett H. Bennett, MD, 2012  
 John B. Bitner, MD, 2012  
 Kofi O. Boahene, MD, 2012  
 Harley S. Dresner, MD, 2012  
 Kevin H. Ende, MD, 2012  
 Tang Ho, MD, 2012  
 Michael M. Kim, MD, 2012  
 Edward S. Kwak, MD, 2012  
 Benjamin C. Marcus, MD, 2012  
 Jason D. Meier, MD, 2012  
 George T. Moynihan, MD, 2012  
 Mark R. Murphy, MD, 2012  
 Thomas C. Norton, MD, 2012  
 Paul Presti, MD, 2012  
 Shepherd G. Pryor, MD, 2012  
 Sandeep D. Sule, MD, 2012  
 Richard W. Westreich, MD, 2012

Mathew B. Zavod, MD, 2012  
 Michael Brandt, MD, 2013  
 Jen Y. Chow, MD, 2013  
 Jared Christophel, MD, 2013  
 Jaimie DeRosa, MD, 2013  
 Alex S. Donath, MD, 2013  
 Laura Hetzler, MD, 2013  
 Paul L. Leong, MD, 2013  
 William D. Losquadro, MD, 2013  
 Joshua D. Rosenberg, MD, 2013  
 Christopher R. Savage, MD, 2013  
 Taha Shipchandler, MD, 2013  
 James R. Tate, MD, 2013  
 Andrew A. Winkler, MD, 2013  
 Haresh Yalamanchili, MD, 2013  
 Robert W. Brobst, MD, 2014  
 Andrew Burchard, MD, 2014  
 Perrin Clark, MD, 2014  
 Payam Daneshrad, MD, 2014  
 Jason Hamilton, MD, 2014  
 Doug Henstrom, MD, 2014  
 Jill L. Hessler, MD, 2014  
 Paul K. Holden, MD, 2014  
 Clinton D. Humphrey, MD, 2014  
 Sanjay P. Keni, MD, 2014  
 William A. Kennedy, MD, 2014  
 Robin W. Lindsay, MD, 2014  
 Stacie D. McClane, MD, 2014  
 Ritvik P. Mehta, MD, 2014  
 Sachin S. Parikh, MD, 2014  
 Sunny S. Park, MD, 2014  
 Krishna G. Patel, MD, 2014  
 James M. Pearson, MD, 2014  
 James M. Ridgway, MD, 2014  
 Ali Sepehr, MD, 2014  
 P. Daniel Ward, MD, 2014  
 Sirius K. Yoo, MD, 2014  
 Hootan Zandifar, MD, 2014  
 Steve Duffy, staff liaison

**AAFPRS 2011-2012  
 Official Delegates and  
 Representatives**

Accreditation Association for  
 Ambulatory Health Care (AAAHC)  
 Richard D. Gentile, MD

American Academy of Otolaryngology-  
 Head and Neck Surgery (AAO-HNS)  
 Corey S. Maas, MD, Governor  
 Roger A. Allcroft, MD, Legislative  
 Representative to Board of Governors  
 Paul S. Nassif, MD, Public Relations  
 Representative to Board of Governors

American Board of Otolaryngology  
 (ABOto)  
 Peter A. Hilger, MD, Liaison

American College of Surgeons (ACS)  
 Fred G. Fedok, MD, Governor

American Medical Association (AMA)  
 Russell W.H. Kridel, MD, Delegate  
 Edward D. Buckingham, MD, Alternate  
 Delegate  
 Michael J. Brenner, MD, Delegate to  
 Young Physicians Section  
 Scott Chalet, MD, Delegate, Resident/  
 Fellow Section  
 Wayne F. Larrabee, Jr., MD, Editor,  
*Archives of Facial Plastic Surgery*  
 David Reiter, MD, DMD, Physician  
 Consortium on Performance  
 Improvement Representative  
 Edward H. Farrior, MD, CPT-4 Advisory  
 Committee Representative

## AAFPRS Committee Charges 2011-2012

*The charges for each committee are those provided in the Bylaws or established as standing charges by virtue of past actions of the Academy Board of Directors.*

### AUDIT COMMITTEE

Reviews the audited statements of the Academy and performs inquiries and reviews as it deems appropriate to ensure itself of the proper use of Academy funds.

### CREDENTIALS COMMITTEE

Verifies the qualifications of applicants to become fellows, members, and international members and conducts investigations, personal interviews, or inquiries it deems necessary.

### EMERGING TRENDS & TECHNOLOGIES COMMITTEE

Reviews and disseminates information on innovations in treatment, surgical procedures, implants and other devices; recommends policies relating to surgical techniques and devices in the interest of providing the best possible care for patients.

### ETHICS COMMITTEE

Responsible for complaint and grievance review regarding moral and ethical issues. All complaints or requests for disciplinary action shall be made in writing and addressed to the executive vice president of the Academy. The committee shall consist of the immediate past president as chair, as well as three other past presidents, two AAFPRS board members and two other fellows appointed by the president, chairs of committees governing credentials, public information and young physicians.

### MEMBERSHIP/RESIDENCY RELATIONS COMMITTEE

Reviews new members and retention statistics and makes recommendations to the Academy Board of Directors regarding membership goals; reviews membership promotions program, including international membership; and makes suggestions to staff and Board of Directors as appropriate.

Maintains continuing communication with residency training directors and facial plastic contacts; encourages teaching of facial plastic surgery in residency programs; recommends to the Foundation Board of Directors videotapes that should be offered to residency programs at a discount; and promotes Academy membership and benefits to residents.

### MULTIMEDIA COMMITTEE

*Electronic Media Subcommittee.* Makes recommendations to the Academy Board of Directors regarding future topics for the John Dickinson Memorial Library, and videotapes that should be withdrawn; identifies and helps solicit commercial support for the development of videotapes; may make recommendations to the Academy Board of Directors concerning the development of audiovisual materials for instructional or marketing purposes; reviews the use of the Learning Center and may make recommendations regarding its staffing, equipment, refurbishing, and funding. Recommendations are forwarded from the Academy Board to the Foundation Board.

*Editorial Review Subcommittee.* Reviews and approves storylines and timelines in advance for both *Facial Plastic Times* and *Facial Plastic Surgery Today*; reviews copy for *Facial Plastic Surgery Today* to ensure content accuracy.

*Publications Subcommittee.* Reviews and suggests updating of patient brochures, as well as new titles; recommends editorial policy for *Facial Plastic Times* and *Facial Plastic Surgery Today*; oversees direction of Academy's pages in the

*Archives of Otolaryngology-Head and Neck Surgery*; and oversees publication of other printed communications as directed by Academy Board of Directors.

*Worldwide Web Subcommittee.* Reviews all matters related to the structure and content of the AAFPRS Web site. Recommends to the Board of Directors policies to govern this communications and public information medium.

### NOMINATING COMMITTEE

Nominates two persons each year for each position vacant on the Nominating Committee. It must nominate at least two candidates for all other vacant positions.

### PAST PRESIDENTS COUNCIL

Functions as an advisory body to the Academy President, may be asked to advise the Academy's Ethics Committee, and collects materials for Academy archives.

### PATIENT SAFETY, QUALITY IMPROVEMENT AND ACCREDITATION COMMITTEE

Promotes and disseminates information on patient safety and quality improvement practices within the specialty of facial plastic and reconstructive surgery; creates and coordinates patient safety activities and programs; provides guidance to Academy representative to the AAAHC Board and makes recommendations to the AAFPRS Board in regard to policies and programs concerning ambulatory health care.

### PUBLIC INFORMATION COMMITTEE

Develops overall strategy for public information programs, including FPSIS, for approval by Academy Board of Directors; recommends programs and budget for public information activities to Board of Directors; and establishes a reciprocal liaison with AAO-HNS Public Information Committee.

### REGULATORY AND SOCIOECONOMIC AFFAIRS COMMITTEE

Monitors medical-related activities of federal and state legislatures and state boards of medicine, and socioeconomic developments at all levels that affect facial plastic surgeons and, as appropriate, recommends action(s) to the Academy Board of Directors; recommends presentations and topics to program chairmen and to publications committee; maintains liaison with appropriate AAO-HNS committee(s) as well as with committees of other organizations; works to build stronger alliances with other specialty groups in support of mutual goals; makes recommendations to the appropriate education committee regarding inter-specialty programs; and provides guidelines and suggests policies for issues related to all aspects of a facial plastic surgery practice.

### WOMEN IN FACIAL PLASTIC SURGERY

Provides support to female members; recruits and encourages women to pursue careers in facial plastic surgery; and encourages participation by our female members in research, education, and leadership roles in the AAFPRS and the medical community.

### YOUNG PHYSICIANS COMMITTEE

Provides a vehicle to formulate and present to the Board matters of concern to young physicians; serves as mentors to their peers and helps increase the visibility of those issues; and enhances the educational experience for young facial plastic and reconstructive surgeons as it relates to their training and expertise.

# BYLAWS

## of the American Academy of Facial Plastic and Reconstructive Surgery

### Article I NAME

The name of the Academy shall be the American Academy of Facial Plastic and Reconstructive Surgery.

### Article II OBJECTIVES AND PURPOSES

The objectives and purposes of the Academy shall be as stated in the Articles of Incorporation.

### Article III MEMBERSHIP PROCEDURES

#### Section 1. Nature of Membership

Membership in the Academy is a privilege which shall be extended only to professionally competent, licensed physicians with MD or DO degrees who continually meet the qualifications, standards and requirements for membership established by the Academy and as contained in the Articles of Incorporation, Bylaws, fellowship pledge, rules and regulations, and policies adopted by the membership or the board of directors. Only those individuals who can document to the satisfaction of the Academy their background, training, experience, reputation, character, ethics, and health will be granted Academy membership. No individual shall, as a matter of right, be entitled to membership solely on the basis of board certification, admission to any other professional organization or society, years of service, or hospital clinical privileges. No persons shall be elected or remain members of the Academy without adequately demonstrating that they are of good reputation and standing within their community and of high ethical character and professional repute.

#### Section 2. Categories of Membership

There shall be ten categories of membership in the Academy, namely, Fellows, Members, Resident Members, Associate Members, International Members, Emeritus Members, Honorary Members, Retired Members, Inactive, and Presidential Members.

#### Section 3. Application

Applications for membership shall be submitted on forms provided by the Academy and shall designate the category for which application is made. All applications for membership shall be supported by sponsors as stated by criteria adopted by the board of directors.

#### Section 4. Procedure for Consideration

Applications for resident members and emeritus members shall require the approval of the secretary only. Resident members may be automatically advanced to members upon proof of certification by an appropriate examining board. Applications for fellows, members, and international members who have not previously been resident members shall be forwarded to the credentials committee, which shall investigate the qualifications and eligibility. Such investigation may include an interview with the candidate by one or more members of the credentials committee, or a designee. The credentials committee, upon completing its deliberations and investigations, shall make a recommendation to the board of directors concerning the candidate's qualification for membership.

#### Section 5. Board Action

The board of directors shall act upon all recommendations by the credentials committee. An affirmative vote of two-thirds of the directors present at a meeting shall be required for approval for membership in the Academy. In the event of an adverse recommendation by the credentials committee or an adverse action by the board of directors, in recognition of the fact that membership in the Academy is honorary in nature and no candidate shall be entitled to question the decision by way of a hearing or otherwise.

#### Section 6. Fellowship Pledge

All candidates for membership must sign the fellowship pledge as set out in Article XVIII of these bylaws before their election to membership is complete.

#### Section 7. Suspension of Requirements

The board of directors shall, in its sole discretion, have authority to suspend any or all of the general or specific requirements for membership.

### Article IV SPECIFIC REQUIREMENTS FOR EACH CATEGORY OF MEMBERSHIP

#### Section 1. Fellows

(a) Fellows shall be diplomats of (1) a recognized American examining board of medical specialists in a specialty applicable to the head and neck area or its equivalent; (2) fellows of the American College of Surgeons or fellows of the Royal College of Surgeons (C), or diplomates of the American Board of Facial Plastic and Reconstructive Surgery (ABFPRS); and (3) citizens or residents of the United States or Canada.

(b) Fellows must have training and experience in facial plastic and reconstructive surgery and shall have been actively engaged in such practice for a period of three years prior to application to be eligible for this membership status.

(c) Candidates to become fellows who do not hold an ABFPRS certificate must submit a detailed report of thirty-five major facial plastic and reconstructive surgical procedures performed within a 12-month period in accordance with the criteria for such procedures established by the board of directors. In addition, candidates shall submit a listing and brief description of every surgical procedure performed in the same 12-month period prior to application.

(d) Fellows shall enjoy all the privileges, rights, duties, and obligations of fellowship in the Academy.

#### Section 2. Members

(a) Members shall be diplomates of a recognized American examining board of medical specialists in a specialty applicable to the head and neck area or its equivalent, have the requisite training and experience in facial plastic and reconstructive surgery as determined by the board of directors, and be citizens or residents of the United States or Canada.

(b) Members, after a period of three years, are encouraged to seek to upgrade to fellow membership status by applying for promotion to fellow membership status and submitting evidence that they are qualified for promotion.

(c) Candidates for membership must submit a list of every surgical procedure performed within the twelve-month period prior to application.

(d) Members shall enjoy all the privileges, rights, duties, and obligations of membership, except the right to hold an elective office, chair a committee, or serve as a member of an elected committee. A member may, however, serve as the young physician representative to the board of directors.

### Section 3. Resident Members

(a) Resident members shall be physicians who are in residency training and who are interested in facial plastic surgery. They may retain their membership for up to two years after completion of residency training with the expectation that during this time they will become board-certified by a recognized American examining board of medical specialties in a specialty applicable to the head and neck area or its equivalent.

(b) Resident members will be automatically advanced to members upon proof of certification by an appropriate examining board.

(c) Resident membership may be terminated four years after completion of residency training or proof of certification by an appropriate examining board has been submitted in accordance with these bylaws. An exception may be granted by the board of directors in extenuating circumstances, such as military service. Any termination will be without entitlement to question the decision by way of hearing or otherwise.

(d) Resident members shall enjoy all the privileges, rights, duties, and obligations of membership except the right to vote at membership meetings or hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

### Section 4. Associate Members

(a) Associate members shall be physicians who have completed residency and who are interested in facial plastic surgery. They may retain their membership for up to four years after completion of residency training with the expectation that during this time they will become board-certified by a recognized American examining board of medical specialties in a specialty applicable to the head and neck area or its equivalent and upgrade to member status.

(b) Associate members will be automatically advanced to members upon proof of certification by an appropriate examining board and paying an application fee to the Academy. The amount of the fee is determined by the board of directors.

(c) Associate membership may be terminated four years after completion of residency training if proof of certification by an appropriate examining board has not been submitted in accordance with these bylaws. An exception may be granted by the board of directors in extenuating circumstances, such as military service. Any termination will be without entitlement to question the decision by way of hearing or otherwise.

(d) Associate members shall enjoy all the privileges, rights, duties and obligation of membership except the right to vote at membership meetings or hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

### Section 5. International Members

(a) International members shall be physicians who are not citizens or residents of the United States or Canada but who meet all the other requirements for membership.

(b) International members shall enjoy all the privileges of membership in the Academy, except the right to vote at membership meetings, hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

### Section 6. Emeritus Members

(a) Fellows, members, and international members in good standing, who by reason of physical infirmity or retirement from practice after the age of 70, perform no surgery, or those age 65 who have been dues-paying members for 25 years, may be granted emeritus membership status by the secretary upon written request. A fellow who thereby attains emeritus status shall become an emeritus fellow. A member who attains emeritus status shall become an emeritus member. An international member who attains emeritus status shall become an emeritus international member.

(b) Emeritus fellows and emeritus members shall enjoy all the membership privileges of members in the Academy but shall not be required to pay dues or assessments. Emeritus international members shall enjoy all the privileges of international members but shall not be required to pay dues or assessments.

### Section 7. Honorary Members

(a) Honorary members shall be persons of outstanding achievement who have been approved by the board of directors.

(b) Honorary members shall enjoy all the rights and privileges of membership except the right to vote at membership meetings, hold an elective office, or serve on a committee. They shall not pay dues, registration fees, social fees, or any other assessments.

### Section 8. Presidential Members

(a) Emeritus members who have shown distinguished service to the Academy may be specifically honored by the board of directors through nomination by the president and approval of the board of directors.

(b) Presidential members shall enjoy all the membership privileges of members in the Academy, but shall not be required to pay dues or assessments.

### Section 9. Retired Members

A member, fellow, or international member who has retired from active practice and is not eligible for emeritus membership may become a retired member or fellow upon request to the board of directors and approval of that request by a majority vote of the board of directors. Retired members or fellows shall enjoy all of the privileges and responsibilities of members. Retired members or fellows shall pay a nominal fee as determined from time to time by the board of directors.

### Section 10. Inactive Members

A member, fellow, or international member who is no longer engaged in the active practice of medicine by reason other than retirement may become "inactive" upon request to the board of directors and approval of that request by majority vote of the board of directors. Reinstatement as a member shall be at the

discretion of the board of directors upon submission of an application or other information and the payment of such fees and assessments as the board of directors may determine to be equitable. Inactive member status shall be subject to annual review. Inactive members are exempt from paying dues but shall pay a nominal fee as determined from time to time by the board of directors. Inactive members shall forfeit membership privileges to vote, hold committee membership, serve as a committee chair, or hold elected office.

#### **Section 11. Criteria for Continued Membership**

The Board of Directors shall adopt criteria for eligibility for continued membership for each category of membership from time to time; such criteria may include, but are not limited to, evidence of continued medical education. Failure to comply with such criteria as adopted shall result in termination of membership. As a condition of continued membership, a Fellow or Member who regularly performs surgery utilizing anesthesia of Level 2 or higher in an ambulatory surgery facility or office-based surgery facility must assure that the facility is accredited by an accrediting organization approved by the Academy's Board of Directors.

#### **Section 12. Board of Directors' Authority Regarding Membership Privileges**

Notwithstanding anything else in these bylaws, the board of directors may limit the use of the Academy's trademarks and service marks (whether or not registered) and participation in certain Academy activities to a specified category or categories of membership.

#### **Article V**

##### **CONFIDENTIALITY OF ACTION**

The entire contents of any application for membership in the Academy for whatever category, shall be privileged and confidential and shall not be subject to publication or public dissemination whether voluntary, involuntary, or by operation of law. Said application shall be forwarded only to appropriate individuals in the Academy, including the credentials committee and the board of directors for consideration. Any investigation or inquiries made or responses received by these individuals shall likewise be privileged and confidential. Candidates shall at no time be permitted to review or copy the contents of their application files. Publications to the members of the Academy of a list of candidates for membership and of a list of newly elected members or of current members shall not be considered to be a disclosure of the contents of the application file.

#### **Article VI**

##### **DISCIPLINE**

##### **Section 1. Forms of Disciplinary Action**

All disciplinary actions shall be taken by the board of directors. The board may censure, reprimand, suspend, expel, or otherwise discipline members. So that the board will have information about disciplinary actions affecting members, every member must notify the board in writing of any disciplinary action brought against that member by the member's state medical board or licensing board and, on request, provide a copy of the documents filed in that action.

##### **Section 2. Automatic Expulsions**

Loss of unlimited medical license or board certification shall result in automatic expulsion from Academy membership. The following may result in automatic expulsion from Academy membership:

- (a) Failure to attend one regional or semi-annual scientific meeting of the Academy or an Academy-sponsored course during a three-year period without good cause as determined by the board of directors.
- (b) Failure to pay dues.

##### **Section 3. Grounds for Disciplinary Action**

A member may be disciplined for any of the following reasons:

- (a) Failure to comply with the requirements contained in the Articles of Incorporation, Bylaws, fellowship pledge, or the rules, regulations, and policies of the Academy as adopted by the membership of the board of directors.
- (b) Continued failure to comply with the applicable requirements for membership.
- (c) Any professional or personal conduct which adversely reflects on the Academy.
- (d) Failure to provide the information regarding disciplinary proceedings required by Article VI, Section 1 of these by laws.
- (e) Failure to assure accreditation required by these by laws.

##### **Section 4. Complaints and Procedures**

All complaints or requests for disciplinary action shall be made in writing and addressed to the executive vice president of the Academy.

The Ethics Committee shall meet to consider the matter. If it determines that the alleged offense would potentially warrant suspension or expulsion from Academy membership, it shall schedule a meeting with the member in question. The member in question shall be notified at least thirty days in advance of the date, place, and time of the meeting as well as the nature of the complaint. The member may appear before the Ethics Committee to discuss the concerns. The purpose of the meeting shall be to provide an intra-professional forum for the resolution of the concerns specified. An adversarial proceeding is not contemplated and the involvement of legal counsel is discouraged so as not to impede the intra-professional nature of the meeting. However, should the member wish to have an attorney present, the member shall notify the Ethics Committee in advance. The role of legal counsel shall be limited to advising a client, and no formal participation shall be permitted. The Academy may, in such case, also request that its attorney be present. The Ethics Committee shall submit written recommendations to the board of directors. If the recommendations are for suspension or expulsion, written notice shall be sent to the affected member not less than thirty days prior to the scheduled date of the meeting of the board of directors at which the matter is to be considered, informing the individual that a written submittal to the board of directors may be made. A copy of the recommendation of the Ethics Committee shall be included in such written notice. The member in question may submit any written materials the member wishes up until ten days before meeting.

Disciplinary action of a member of the Academy shall require the affirmative vote of not less than two-thirds of the directors voting at a meeting. Notice of the final decision shall be sent to the affected member.

## Section 5. Status During Proceedings

The status of a member involved in disciplinary proceedings shall remain unaltered during such proceedings, except in the case of automatic terminations.

## Article VII

### RESIGNATION

#### Section 1. Written Notice

Any member may resign by filing a written resignation with the Academy. Resignation does not relieve that member of the obligation for charges accrued and unpaid.

#### Section 2. Return of Membership Certificate

Upon resignation or removal from membership by action of the board of directors, the Academy membership certificate shall be returned to the Academy immediately.

## Article VIII

### BOARD OF DIRECTORS

#### Section 1. General Powers

The board of directors shall be the overall policymaking body for the Academy and shall have overall responsibility for the programs and business of the Academy.

#### Section 2. Composition and Term

(a) The board of directors shall be composed of the officers of the Academy, the immediate past president, the regional directors, and the young physician representative, and an at-large director.

(b) All directors shall serve with vote except the secretary-elect, treasurer-elect, vice-presidents-elect, and executive vice president, who shall serve as non-voting, ex-officio members of the board.

(c) Directors shall serve terms concurrent with their terms of office except for regional directors, who shall serve staggered three-year terms. The young physician representative and regional directors are not eligible for election to consecutive terms.

(d) The young physician representative will serve one, three-year term. For purposes of this section, the young physician representative is defined consistent with section 7.52 of the Constitution and Bylaws of the American Medical Association.

#### (e) Regional Directors

Five regional directors shall reside in and represent each of the following geographic areas:

#### Eastern

Connecticut	Maryland	New York
Delaware	Massachusetts	Pennsylvania
District of Columbia	New Hampshire	Rhode Island
Maine	New Jersey	Vermont

#### Midwestern

Illinois	Michigan	North Dakota
Indiana	Minnesota	Ohio
Iowa	Missouri	South Dakota
Kansas	Nebraska	Wisconsin

#### Southern

Alabama	Mississippi	Tennessee
Arkansas	North Carolina	Texas
Florida	Oklahoma	Virginia
Georgia	Puerto Rico	Virgin Islands
Kentucky	South Carolina	West Virginia
Louisiana		

#### Western

Alaska	Idaho	Oregon
Arizona	Montana	Utah
California	Nevada	Washington
Colorado	New Mexico	Wyoming
Hawaii		

#### Canadian

All Provinces

They shall serve staggered three-year terms and shall not be eligible to succeed themselves in office for one additional term. They shall be elected to office by their respective regional members as stated in Article XI, Section 2.

(f) The immediate past president, regional directors, young physician representative, and at large director may only serve one term in their respective offices.

#### Section 3. Vacancies

A vacancy on the board of directors because of death, resignation, refusal to act, removal or disqualification, or otherwise, shall be filled as follows:

(a) If the director had served by virtue of an elective office, and if a successor in office has been elected, then the successor in office shall fulfill the term as director.

(b) If the director had served by virtue of being the immediate past president, then no one shall be elected or appointed to fulfill his term as director. In this instance, the number of directors shall be reduced by such vacancy for purposes of determining a quorum.

(c) If the director held an office for which no successor has been elected, or of the director had been a regional director or the Young Physician Representative, then a successor director shall be elected in accordance with these bylaws.

(d) If a vacancy in office is temporarily filled under these bylaws, the office filling that vacancy shall also act as a director, if the holder of that office is a director under these bylaws.

(e) If there is an unfilled vacancy on the Board of Directors, the number of directors shall be reduced by such vacancy for purposes of determining a quorum.

#### Section 4. Regular Meetings

Three regular meetings of the board of directors shall be held, one in conjunction with the annual meeting of the Academy. The board of directors may provide by resolution the time and place to hold additional regular meetings of the board without other notice than such resolution.

#### Section 5. Special Meetings

Special meetings of the board of directors may be called by the president or by a majority of the directors. The person or persons authorized to call special meetings of the board may fix the time and place to hold any special meetings of the board called by them.

#### Section 6. Notice

Notice of any regular, special or telephone meeting of the board of directors shall be sent to each director not less than fifteen days before such meeting. Notice may be waived in writing by a director either before or after a meeting. Neither the business to be transacted at nor the purpose of any regular or special meeting of the board need be specified in the notice or waiver of notice of such meeting.

### Section 7. Quorum and Manner of Acting

A majority of the board of directors shall constitute a quorum. A majority of the quorum at any meeting of the board shall constitute action by the board unless otherwise provided by law or by these bylaws.

### Section 8. Informal Action by Directors

Any action required or permitted to be taken at a meeting of the board of directors may be taken without a meeting if a consent in writing, setting forth the action to be taken, is signed by all directors entitled to vote.

### Section 9. Telephone Meetings

Meetings may be conducted by telephone provided that all directors participating in such telephone meeting may communicate with each other. A majority of directors shall constitute a quorum for telephone meetings, and the act of the majority of the quorum shall constitute action by the board.

### Section 10. Compensation

Directors shall not receive compensation for their services, but by any action of the board of directors, expenses may be allowed for attendance at meetings of the board or for official representation of the Academy.

### Section 11. Executive Committee

The executive committee of the board shall consist of the president, immediate past president, president-elect, secretary, treasurer, group vice president for membership and society relations, and group vice president for public and regulatory affairs. The secretary-elect, vice president-elect for regulatory and public affairs, vice president-elect for membership and society relations, group vice president for education, group vice president for research, development, and awards, and executive vice president shall serve as ex-officio members without votes and without being counted to determine a quorum. The executive committee shall act for the board between meetings. Four members of the executive committee shall constitute a quorum. All actions taken by the executive committee must be reported to the board at the next duly convened meeting of the board.

### Section 12. Indemnification

The corporation shall indemnify any and all of its present and former directors, officers, employees, agents, committee members, or any person who may have served at its request or by election as a director or officer of another corporation or association in accordance with policies adopted from time to time by the board of directors.

### Section 13. Removal or Suspension from Office

The board of directors may remove from office any officer or director who is convicted of any criminal offense, who pleads guilty or *nolo contendere* to any criminal offense, or who suffers disciplinary sanctions from any medical or regulatory disciplinary board or organization or who fails to perform the duties of that office. The board of directors may suspend from active service as an officer or director any member who is charged with criminal activity or who is charged with a disciplinary violation.

## Article IX

### OFFICERS

#### Section 1. Officers

The officers of the Academy shall be as provided in this article.

#### Section 2. Qualifications

Only fellows in good standing shall be eligible for election as officers. Past presidents shall not be eligible to hold any office other than regional vice president or at-large member of the board.

#### Section 3. President

The president shall serve a one-year term and shall not be eligible for re-election. The president shall be the chief spokesperson for the Academy. The president's authority and duties shall include, but not be limited to: presiding at all meetings of the Academy, the board of directors, and the executive committee; appointing committee members and chairmen of committees, with the approval of the board, where permitted by these bylaws; selecting, with approval of the board of directors, individuals to serve as liaisons to appropriate organizations, as needed or desired; serving as an ex-officio member without vote on all committees of the Academy, except the credentials and nominating committees; filling vacancies in office or committees between annual meetings where permitted by these bylaws; acting in the event of an emergency or to correct any violations of these bylaws; and performing all duties incident to this office and such other duties as may be prescribed by the board of directors from time to time.

#### Section 4. President-Elect

In the absence of the president or in the event of the president's death or inability or refusal to act, the president-elect shall perform the duties of the president and when so acting shall have the powers of and be subject to all the restrictions upon the president. The president-elect shall succeed to the office of president at the close of the next annual meeting following election as president-elect, or in the event of the death or inability or refusal to act of the president. In the event the president-elect succeeds to the office of the president by reason other than natural succession, the president-elect shall serve for the remaining unfulfilled term of the current president and an additional one-year term of office as president. The president-elect shall be an ex-officio member, without vote, of all committees of the Academy, except the credentials and nominating committees.

#### Section 5. Executive Vice President

The board of directors shall employ an executive vice president to manage the Academy's programs and business. The executive vice president shall be given the necessary authority and be held responsible for the direction, administration, and coordination of the Academy in all of its activities, subject only to such policy as may be adopted and such orders as may be issued by the board of directors. The executive vice president shall have a continuing term of office until resignation or termination by the board of directors. The executive vice president shall be an ex-officio member, without vote, of all committees of the Academy, except the Credentials Committee.

### **Section 6. Group Vice President for Education**

The group vice president for education shall be responsible for the supervision and direction of all educational activities and shall provide liaison to the AAFPRS Foundation in those fields.

The group vice president for education shall serve a three-year term and may only serve one term in this office.

### **Section 7. Group Vice President for Public and Regulatory Affairs**

The group vice president for public and regulatory affairs shall be responsible for the supervision and direction of the Academy's public and regulatory affairs and shall coordinate the activities related to multimedia, regulatory and socioeconomic affairs, marketing, public information and relations.

The group vice president for public and regulatory affairs shall serve a three-year term and may only serve one term in this office.

### **Section 8. Group Vice President for Research, Awards, and Development**

The group vice president for research, awards, and development shall be responsible for the supervision and direction of all activities in the areas of research, awards, and development and shall provide liaison to the AAFPRS Foundation in those fields. The group vice president for research, awards, and development shall serve a three-year term and may only serve one term in this office.

### **Section 9. Group Vice President for Membership and Society Relations**

The group vice president for membership and society relations shall be responsible for the supervision of the Academy's membership and public relations and shall coordinate the activities relating to membership and residency relations, societies relations and young physician's section.

The group vice president for membership and society relations shall serve a three-year term and may only serve one term in this office.

### **Section 10. Treasurer**

The treasurer oversees the administration of all funds, securities, and assets of the Academy and shall report regularly to the executive committee, board of directors, and membership on the Academy's financial status. The treasurer shall present an annual budget to the board of directors for its review and adoption. The treasurer shall perform other duties incident to the office as may be prescribed by the board of directors or president. The treasurer shall serve a three-year term and may only serve one term in this office.

### **Section 11. Treasurer-Elect**

At the annual meeting preceding the expiration of the term of office of the current treasurer, a treasurer-elect shall be elected to serve for a one-year term of office. The treasurer-elect shall succeed to the office of treasurer upon the expiration of the incumbent treasurer's term of office, or upon the treasurer's death, resignation, or removal. The treasurer-elect, in the absence of the treasurer or in the event of the treasurer's inability or refusal to act, shall perform the duties of and be subject to all restrictions upon the treasurer. The treasurer-elect shall serve as

an ex-officio member of the board of directors without vote and executive committee without vote.

### **Section 12. Secretary**

The secretary ensures that accurate minutes are kept of all meetings of the Academy, board of directors, and executive committee; ensures that all notices are duly given in accordance with the provisions of these bylaws or as required by law; oversees the keeping of a register of the address of each member; and directs the publication and mailing of the list of nominees for officers, directors, and committees prepared by the nominating committee.

The secretary shall perform all duties incident to the office and such other duties as from time to time may be assigned by the president or the board of directors. Upon the death of both the president and the president-elect, the secretary shall assume the office of president for the remainder of the term. The secretary shall serve a four-year term of office and may only serve one term in this office.

### **Section 13. Secretary-Elect**

At the annual meeting preceding the expiration of the term of office of the current secretary, a secretary-elect shall be elected to serve for a one-year term of office. The secretary-elect shall succeed to the office of secretary upon the expiration of the incumbent secretary's term of office, or upon the secretary's death, resignation, or removal. The secretary-elect, in the absence of the secretary or in the event of the secretary's inability or refusal to act, shall perform the duties and be subject to all restrictions upon the secretary. The secretary-elect shall serve as an ex-officio member of the board of directors and executive committee without vote.

### **Section 14. Vice-Presidents-Elect**

At the annual meeting preceding the expiration of the terms of office of the group vice presidents, vice-presidents-elect shall be elected to serve for a one-year term of office, one designated for each of those group vice presidencies. Each vice-president-elect shall succeed to the respective office of group vice president upon the expiration of that group vice president's term of office, or upon that group vice president's death, resignation, or removal. The vice president-elect, in the absence of the group vice president or in the event of the group vice president's inability or refusal to act, shall perform the duties and be subject to all restrictions upon the group vice president. The vice presidents-elect shall serve as ex-officio members of the board of directors and executive committee without vote.

### **Section 15. Vacancies**

A vacancy in any office, except that of president-elect, secretary-elect, treasurer-elect, vice president-elect, or immediate past president because of death, resignation, refusal to act, removal or disqualification, or otherwise, may be filled by appointment by the president until the next annual meeting, unless otherwise provided by these bylaws. At the next annual meeting, the Nominating Committee will present nominees to fill any such vacancies for consideration in accordance with these bylaws. A vacancy in the office of president-elect shall be filled in accordance with these bylaws.

## Section 16. Timely Performance of Duties

All officers shall discharge their duties in a timely fashion.

## Article X

### ELECTED COMMITTEES

#### Section 1. Classification

The credentials committee, audit committee, and nominating committee members shall be elected by the membership.

#### Section 2. Nominating Committee

The Nominating Committee shall consist of 12 fellows, five of whom shall be the regional directors, six of whom shall be elected, and the 12th being the immediate past president of the Academy, who shall serve as committee chairman. Elected Nominating Committee members shall serve two-year staggered terms with three members elected each year. Nominating committee members may serve two terms, but those terms may not be consecutive. If a regional director has previously been elected for the Nominating Committee for the two term limit, such regional director may nevertheless serve on the Nominating Committee. The immediate past president's service on the committee as chair ex-officio may not count against the two-term limit.

#### Section 3. Credentials Committee

The credentials committee shall consist of six members, including five elected members representing each of the regions, who have been fellows in the Academy for at least three years. Members shall serve staggered five-year terms. In addition, the chairman of the credentials committee shall be designated by the board of directors and may serve for three terms of two years each. The chairman must have served three years on the committee to qualify as chairman. The credentials committee shall be responsible for verifying the qualifications of applicants to become fellows, members, and international members, and shall conduct whatever investigations, personal interviews, or inquiries it deems necessary. Each member of the credentials committee shall treat all applications and information obtained during any interview or inquiry as privileged and confidential and shall not make any public disclosure or publication of said information except to the board of directors as heretofore provided.

#### Section 4. Audit Committee

The audit committee shall consist of five members, three of whom must be elected, and the treasurer and executive vice president shall serve ex-officio without vote. Elected members shall serve three-year staggered terms with one member elected each year. The function of the audit committee shall be to review the audited statements of the Academy and perform inquiries and reviews as it deems appropriate to ensure itself of proper use of Academy funds. The audit committee shall report annually to the board.

#### Section 5. Vacancies

If a member of either of these committees is unable to fulfill his term of office for any reason, the president shall appoint a successor to serve until the next annual meeting.

## Article XI

### ELECTIONS

#### Section 1. Nominations

(a) Nominations for office can be made only by the nominating committee, or by petition.

(b) The Nominating Committee shall prepare a slate of nominees for the various offices, committees, and directorships, and any vacancies. The slate shall contain at least two names for each vacancy except—by two-thirds vote of the Nominating Committee—the slate may include one candidate for president-elect. The Nominating Committee will propose at least two eligible candidates each year for the positions on the nominating committee to be vacated that year. Their report will be mailed to voting members by May 1 of the year of the annual meeting.

(c) Additional nominations for the various offices may be made with prior written consent of the nominees by one or more written petitions of ten voting members in good standing received by the secretary by June 1 prior to the annual meeting. By August 1 notice of additional nominees will be mailed to the members.

#### Section 2. Voting

(a) Elections of officers, directors, and elected committee members shall be held by ballot of those members present and eligible to vote and by those members eligible to vote who have cast mail ballots in accordance with the procedure described in these bylaws. The candidate with the most votes will fill the office or place. If more than two candidates for election to the nominating committee each receive majority votes, the places shall be filled by the two receiving the largest number of votes.

(b) Regional directors shall be elected by members of their respective regions.

(c) Credentials committee members representing their respective regions shall be voted on by the total membership.

#### Section 3. Commencement of Term

The term of office or services for those elected at an annual meeting shall commence at the close of said meeting.

## Article XII

### STANDING COMMITTEES

#### Section 1. Past Presidents Council

The past presidents council shall consist of all past presidents of the Academy and shall be chaired by the immediate past president.

#### Section 2. Ethics Committee

The Ethics committee shall be responsible for complaint and grievance review regarding moral and ethical issues. The committee shall consist of the immediate past president as chair, as well as three other past presidents, two AAFPRS board members and two other fellows appointed by the president, chairs of committees governing credentials, public information and young physicians and shall receive advice as needed from legal counsel.

#### Section 3. Duties

The duties and responsibilities of committees relating to the areas of governance of membership, residency relations, international young physicians section, socioeconomic affairs, multimedia, marketing and public information and relations shall be

structured and defined by the board of directors if not specified in these bylaws. Unless otherwise specified by the board of directors, actions by committees are in the nature of advice to the board of directors and do not represent the policies of the Academy unless and until adopted.

#### Section 4. Appointment

The group vice presidents for education and public and regulatory affairs shall make recommendations to the president-elect for members and chairs of committees under their jurisdiction. The chairs shall have served at least one full year on their respective committees and shall be fellows of the Academy. The president-elect shall submit a list of proposed candidates for committee members and committee chairs for those terms about to expire at the fall meeting of the board for its approval.

#### Section 5. Terms

All committee members, unless otherwise specified herein, may serve two three-year staggered terms. In addition, committee chairs may serve an additional three-year term. Terms of committee chairs will be staggered.

#### Section 6. Ad Hoc Committees

Ad hoc committees may be created by the board of directors for a one-year period, unless otherwise specified. The president, with concurrence of the board, shall appoint the members and designate the chairs of such committees. An ad hoc bylaws committee shall be appointed by the president, with approval of the board, at least every four years to conduct an overall review of the bylaws.

#### Section 7. Composition

The size of each standing or ad hoc committee, unless otherwise specified herein, and the duties of each committee shall be determined by the board of directors. At each regular meeting of the board of directors, the chair of each standing committee shall deliver the committee's report.

#### Section 8. Removal of Committee Members

The board of directors may remove any appointed committee members for any reason at the discretion of the board of directors. Elected committee members, officers, and directors may be removed under Article VIII, Section 13 of these bylaws.

### Article XIII

#### MEETINGS OF THE MEMBERSHIP

##### Section 1. Annual Meeting

The annual meeting of the Academy shall occur at such time and place as designated by the board of directors. Notice of the annual meeting shall be sent to all members at least thirty days in advance. The president shall appoint a qualified parliamentarian, who need not be a member of the Academy, to advise him at the meeting.

##### Section 2. Quorum and Voting

A quorum shall consist of those members present and eligible to vote at any regular or special meeting of the Academy, but in no event shall a quorum consist of less than 40 members. Except as otherwise provided in these bylaws, a majority of votes of a

quorum shall constitute action of the membership.

##### Section 3. Special Meetings

Special meetings of the members may be called by the president of the Academy, by resolution of the board of directors, or by written petitions signed by at least five percent of those members eligible to vote at such meetings. The petitions of the members shall be submitted to the executive vice president. The president shall fix a date for said special meeting, which shall be not less than forty-five days nor more than ninety days from date of receipt of petition by the secretary. The time, place, and location of said meeting shall be fixed by the president of the Academy. Notice of any special meeting shall be sent to all voting members at least fourteen days in advance thereof, informing the members of the date, place, time, and purpose of said meeting.

##### Section 4. Resolutions

Proposed resolutions must be submitted at least 120 days before the annual business meeting. The president may refer any such proposed resolution to the appropriate reference committee appointed by the president to study the proposals and make recommendations to the membership. Resolutions adopted at the annual meeting shall be referred to the board of directors for appropriate implementation. In circulating the proposals to the membership, brief statements of the rationale proposed for adoption (as presented by their proponents) and the basis for the recommendations shall be included.

### Article XIV

#### VOTING

##### Section 1. Application

Voting rights at membership and committee meetings, unless otherwise specified by these bylaws, shall be in accordance with this article.

##### Section 2. Procedure

(a) Voting rights at membership and committee meetings, unless otherwise specified by these bylaws, shall be exercised by the member in person. No proxy voting is allowed. Cumulative voting, to place all votes for a particular candidate or a particular issue, is specifically prohibited. Whenever, within these bylaws, a member of a committee is specified to be ex-officio, it is specifically understood that said ex-officio member shall not have the right to vote unless otherwise specified by these bylaws. Only committee members duly elected or appointed shall be eligible to vote at committee meetings.

(b) The following procedure will govern voting by mail:

- (i) Voting by mail is only allowed for elections under these bylaws and for amendments to these bylaws or to the Articles of Incorporation.
- (ii) Mail votes must be received by the Academy office by the date prescribed by the secretary. In no event, however, shall a mail vote be required to be submitted in less than 2 weeks from the date for casting the vote is sent to the member from the Academy office.

**Article XV****FEES AND DUES****Section 1. Application Fees**

Application fees for members shall be determined from time to time by the board of directors.

**Section 2. Annual Dues**

Annual dues in such amounts as determined by the board of directors shall be paid by January of each year for the various classifications of members, unless otherwise provided by these bylaws. If annual dues are still unpaid by April 1 of any year, the delinquent member's name will be presented for appropriate action. Members whose dues remain unpaid will be dropped from membership no later than the fall meeting of the board of directors.

**Section 3. Exemption from Dues**

Exemption from dues may be made by the board of directors.

**Section 4. Registration Fees**

Registration and social fees shall be as determined by the board of directors.

**Article XVI****FISCAL YEAR**

The fiscal year of the Academy shall be the calendar year.

**Article XVII****RULES OF ORDER**

In the absence of any provision in these bylaws, all meetings of the Academy, the board of directors, and duly appointed or elected committees shall be governed by the latest edition of *Robert's Rules of Order, Newly Revised*.

**Article XVIII****FELLOWSHIP PLEDGE**

Each member of the Academy must adhere to and uphold the fellowship pledge, as stated below.

I agree to abide by the Articles of Incorporation and Bylaws of the Academy and by such rules and regulations as may be enacted from time to time, and to advance and extend the ideals and principles of the Academy.

I pledge to pursue the practice of surgery with scientific honesty and to place the welfare of my patients above all else, to advance constantly in knowledge, and to render willing help and teaching to my colleagues in medicine and seek their counsel when in doubt as to my own judgment.

I agree to abide by the guidelines on advertising which are adopted by the Academy in order to promote legitimate and ethical advertising of physicians' services and to avoid the occasion of unprofessional conduct through false or misleading advertising.

I declare that I will not practice the division of fees, either directly or indirectly, and that I will make my fees commensurate with the services rendered.

Finally, I declare that on revocation or resignation of membership, I shall return my membership certificate to the Academy.

**Article XIX****AMENDMENTS TO THE BYLAWS OR TO THE ARTICLES OF INCORPORATION**

Proposed amendments to these bylaws or to the Articles of Incorporation of the Academy must be submitted in writing from at least three fellows or members to the executive vice president not less than 120 days prior to the next annual meeting. The president shall refer the proposed amendments to the Board of Directors or the executive committee for review and recommendation to the membership. A copy of the proposed amendments and recommendations, together with a brief statement of the rationales for the proposed amendments (as presented by their proponents) and recommendations and a mail ballot, shall be sent to each member at least 45 days preceding the annual meeting at which the proposed amendments will be voted on. At the annual meeting, the proposed amendments shall be submitted for a vote. Mail ballots will be counted along with votes at the annual meeting. Amendments to these bylaws or to the Articles of Incorporation of the Academy may be adopted by an affirmative vote of two-thirds of those members eligible to vote and voting in person or by mail.

Adopted, October 19, 1985

Amended, September 13, 1986

Amended, September 24, 1988

Amended, September 22, 1989

Amended, October 1, 1993

Amended, September 24, 1994

Amended, September 16, 1995

Amended, September 27, 1996

Amended, September 5, 1997

Amended, September 11, 1998

Amended, September 24, 1999

Amended, September 22, 2000

Amended, September 7, 2001

Amended, September 20, 2002

Amended, September 19, 2003

Amended, September 20, 2004

Amended, September 23, 2005

Amended, September 20, 2007

Amended, September 19, 2008



## The AAFPRS Foundation

Educational and Research Foundation for the  
American Academy of Facial Plastic and Reconstructive Surgery

In 1974, the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS Foundation) was created to address the medical and scientific issues and challenges which confront facial plastic surgeons.

The AAFPRS Foundation established a proactive research program and educational resources for leaders in facial plastic surgery. Through courses, workshops, and other scientific presentations, as well as a highly respected fellowship training program, the AAFPRS Foundation has consistently provided quality educational programs for the dissemination of knowledge and information among facial plastic surgeons.

In the early 1990s, FACE TO FACE humanitarian programs were established so that AAFPRS members could use their skills and share their talent in helping the less fortunate individuals here and abroad. For more information, visit the FACE TO FACE Web site: [www.facetofacesurgery.org](http://www.facetofacesurgery.org).

FACE TO FACE: International brings AAFPRS members to third world countries where they treat children with facial birth defects and anomalies.

FACE TO FACE: The National Domestic Violence Project allows AAFPRS members to perform surgeries on survivors of domestic abuse here in the United States, who have received injuries to their faces.

The newest member to FACE TO FACE is Faces of Honor. This program offers free surgical care for soldiers who have been injured in the line of duty. For more information, visit the Web site: [www.facesofhonor.org](http://www.facesofhonor.org).

### Message from the Development Office

The Development Office has been busy and we have you to thank!

If you haven't heard, the AAFPRS Foundation is in the midst of a very successful Capital Campaign: *The Many Faces of Generosity ... Facing the Future and Beyond*.

The campaign is an investment in the future of the AAFPRS and the specialty of facial plastic and reconstructive surgery.

The goal is to raise a minimum of \$4M to build the Foundation as the premier center for education, research and humanitarian efforts for facial plastic and reconstructive surgeons.

#### I. The New Face of Education for the Next Generation

- Web portal with access to a multitude of educational tools

#### II. Changing our Culture through Research and Evidence-Based Medicine

- Funds to develop courses to train members on research techniques
- Expanded funds for research grants

#### III. Launching FACE TO FACE to New Heights

- Hire a FACE TO FACE coordinator to take the program to the next level and maximize effectiveness

As of December 2, 2011, we raised \$3M. Please take a look at our current list of donors on page 34. Is your name on the list? May be it's time to consider investing in your Academy and your future.

For more information please go to [www.aafprs.org](http://www.aafprs.org) and click on the latest Campaign Updates. Or contact Ann H. Jenne at [aholton@aafprs.org](mailto:aholton@aafprs.org); (703) 299-9291, ext. 229.

## AAFPRS Foundation Leadership and Committees 2011-2012

### FOUNDATION BOARD

*The year indicates the expiration of term as a board member.*

Tom D. Wang, MD, President (2013)  
Jonathan M. Sykes, MD, Immediate Past President (2012)  
Robert M. Kellman, MD President-elect (2014)  
Stephen S. Park, MD, Secretary (2013)  
Paul J. Carniol, MD, Treasurer (2013)  
Edwin F. Williams, III, MD, Group VP for Public and Regulatory Affairs (2014)+  
John L. Frodel, Jr., MD, Group VP for Education (2012)  
Minas Constantinides, MD, Group VP for Research, Awards and Development (2012)  
Mary Lynn Moran, MD, Group VP for Membership and Society Relations (2013)+  
Fred G. Fedok, MD, Group VP-elect for Education (2015)+  
Craig S. Murakami, MD, Group VP-elect for Research, Development, and Humanitarian Programs (2015)+  
Stephen C. Duffy, Executive Vice President  
+Non-voting member of the Foundation Board

### 2011-2012 FOUNDATION COMMITTEES

*The year indicates expiration of term as committee members or chairs. The position noted after the committee name indicates the Board member who oversees that particular committee. Staff liaisons are noted after each committee roster.*

#### AWARDS COMMITTEE

(GVP for Research, Awards and Development)

Travis T. Tollefson, MD, Chair, 2014  
Patrick J. Byrne, MD, Sr. Advisor  
J. David Kriet, MD, Sr. Advisor  
Jeffrey S. Chien, MD, 2012  
Sandeep D. Sule, MD, 2012  
Timothy Doerr, MD, 2013  
Matthew A. Kienstra, MD, 2013  
Jeffrey H. Spiegel, MD, 2013  
Ivan Wayne, MD, 2013  
Eric J. Dobratz, MD, 2014  
Jennifer C. Kim, MD, 2014  
Michelle Busey, staff liaison

#### CME COMMITTEE

(GVP for Education)

Theda C. Kontis, MD, Chair, 2013  
Anthony P. Sclafani, MD, Sr. Advisor  
  
Michael J. Sullivan, MD, Sr. Advisor  
J. Randall Jordan, MD, Publications Chair, Ex-officio, 2012  
Sam M. Lam, MD, WWW Chair, Ex-officio, 2012  
Craig S. Murakami, MD, Co-Chair, Fall Program, 2012  
Daniel S. Alam, MD, Co-chair Fall Program, 2014  
Manoj T. Abraham, MD, 2012  
Babak Azizzadeh, MD, 2012  
Sumit Bapna, MD, 2012  
Paul J. Carniol, MD, 2012  
John L. Frodel, Jr., MD, 2012  
Stephen A. Goldstein, MD, 2012  
Grant S. Hamilton, MD, 2012  
Jennifer L. Henderson, MD, 2012  
Andrew A. Jacono, MD, 2012  
Phillip R. Langsdon, MD, 2012  
Sam P. Most, MD, 2012  
Seth A. Yellin, MD, 2012  
Kyle S. Choe, MD, 2013  
Jared Chrisophel, MD, 2013  
Timothy Doerr, MD, 2013  
Brian W. Downs, MD, 2013  
Fred G. Fedok, MD, 2013  
Tessa A. Hadlock, MD, 2013  
Thomas T. Le, MD, 2013  
Vishad Nabili, MD, 2103  
Paul S. Nassif, MD, 2013  
Bradford S. Patt, MD, 2013  
Ryan Scannell, MD, 2013  
David W. Stepnick, MD, 2013  
Edwin F. Williams, III, MD, 2013  
Kenneth C.Y. Yu, MD, 2013  
Rami K. Batniji, MD, 2014  
Michael J. Brenner, MD, 2014  
Artemus J. Cox, MD, 2014  
Oren Friedman, MD, 2014  
Mark Hamilton, MD, 2014  
Douglas K. Henstrom, MD, 2014  
Anna P. Hsu, MD, 2014  
Clinton D. Humphrey, MD, 2014  
Michael M. Kim, MD, 2014  
Alexander Markarian, MD, 2014  
Sunny S. Park, MD, 2014  
Jeffrey D. Rawnsley, MD, 2014  
Christian Stallworth, MD, 2014  
Scott Stephan, MD, 2014  
Sarmela Sunder, MD, 2014  
Caryl Bryant, staff liaison

#### ENDOWMENT INVESTMENT COMMITTEE (Treasurer)

Karl J. Eisbach, MD, Chair, 2012  
Harrison C. Putman, III, MD, Sr. Advisor  
Stuart H. Bentkover, MD, 2013  
Richard D. Gentile, MD, 2013  
Benjamin W. Cilento, MD, 2014  
Andrew A. Jacono, MD, 2014  
Amy McFee, staff liaison

#### EVIDENCE-BASED MEDICINE COMMITTEE (GVP for Education)

Lisa Ishii, MD, Chair, Chair, 2014  
Peter A. Hilger, MD, Sr. Advisor  
Patrick J. Byrne, MD, 2013  
Theda C. Kontis, MD, 2013  
Paul L. Leong, MD, 2013  
Sam P. Most, MD, 2013  
David Reiter, MD, DMD, 2013  
John S. Rhee, MD, 2013  
Anthony P. Sclafani, MD, 2013  
Jonathan M. Sykes, MD, 2013  
Robin W. Lindsay, MD, 2014  
Vishad Nabili, MD, 2014  
Steve Duffy, staff liaison

#### FACE TO FACE COMMITTEE

(GVP for Research, Awards and Development)

Harrison C. Putman, III, MD, Chair, 2013  
Minas Constantinides, MD, Sr. Advisor  
John M. Hodges, MD, Sr. Advisor  
Andrew A. Jacono, MD, Sr. Advisor  
Mary Lynn Moran, MD, Sr. Advisor  
Manoj T. Abraham, MD, 2012  
Oneida A. Arosarena, MD, 2012  
Jamil Asaria, MD, 2012  
Sydney Butts, MD, 2012  
Rami K. Batniji, MD, 2012  
John B. Bitner, MD, 2012  
Ryan N. Heffelfinger, MD, 2012  
Kimberley J. Lee, MD, 2012  
Linda Maxwell, MD, 2012  
Marcus W. Moody, MD, 2012  
Amir Moradi, MD, 2012  
Paul S. Nassif, MD, 2012  
Daryoush Saadat, MD, 2012  
Scott A. Scharer, MD, 2012  
Dana S. Smith, MD, 2012  
Benjamin C. Stong, MD, 2012  
Seth A. Yellin, MD, 2012  
Randolph B. Capone, MD, 2013  
J. Charlie Finn, MD, 2013  
Curtis W. Gaball, MD, 2013  
Lily P. Love, MD, 2013  
Krishna G. Patel, MD, 2013

James M. Ridgway, MD, 2013  
 Ryan B. Scannell, MD, 2013  
 Randy Tate, MD, 2013  
 Scott K. Thompson, MD, 2013  
 Michael E. Villano, MD, 2013  
 Michael J. Brenner, MD, 2014  
 Michael A. Carron, MD, 2014  
 Artemus J. Cox, MD, 2014  
 Payam Daneshrad, MD, 2014  
 Gregory E. Davis, MD, 2014  
 Eric Dobratz, MD, 2014  
 Jennifer C. Kim, MD, 2014  
 Stacie D. McClane, MD, 2014  
 Sachin Parikh, MD, 2014  
 Krishna G. Patel, MD, 2014  
 Shepherd G. Pryor, MD, 2014  
 Kevin Robinson, MD, 2014  
 Adam D. Schaffner, MD, 2014  
 Mahdi Shkookani, MD, 2014  
 Christian Stallworth, MD, 2014  
 William H. Truswell, MD, 2014  
 Michelle R. Yagoda, MD, 2014  
 Ann H. Jenne, staff liaison

#### **FELLOWSHIP COMMITTEE**

(GVP for Education)

Theda C. Kontis, MD, Chair, 2012  
 Minas Constantinides, MD, Sr. Advisor  
 Richard E. Davis, MD, Sr. Advisor  
 Edward H. Farrior, MD, Fellowship  
 Review Chair, Ex-officio, 2013  
 J. David Kriet, MD, Fellowship Research  
 Review Subcommittee Chair,  
 Ex-officio, 2012  
 Jaimie DeRosa, MD, Fellowship  
 Curriculum Chair, Ex-officio, 2014  
 Shan R. Baker, MD, 2012  
 Patrick J. Byrne, MD, 2012  
 Roy David, MD, 2012  
 Andrew S. Frankel, MD, 2012  
 Michael S. Godin, MD, 2012  
 J. David Holcomb, MD, 2012  
 Benjamin C. Marcus, MD, 2012  
 Eric J. Moore, MD, 2012  
 George T. Moynihan, MD, 2012  
 David A. Sherris, MD, 2012  
 Tom D. Wang, MD, 2012  
 Jen Y. Chow, MD, 2013  
 Matthew A. Kienstra, MD, 2013  
 Paul L. Leong, MD, 2013  
 Steven R. Mobley, MD, 2013  
 Vishad Nabili, MD, 2013  
 Haresh Yalamanchili, MD, 2013  
 Michael G. Brandt, MD, 2014  
 Ryan M. Greene, MD, 2014  
 Douglas K. Henstrom, MD, 2014  
 Michael Kim, MD, 2014

Robin W. Lindsay, MD, 2014  
 Jeffrey D. Rawnsley, MD, 2014  
 Scott B. Roofe, MD, 2014  
 Sarmela Sunder, MD, 2014  
 Andrew A. Winkler, MD, 2014  
 Fatima Porter-EL, staff liaison

#### **FELLOWSHIP COMMITTEE (FELLOWSHIP CURRICULUM SUB- COMMITTEE)**

Jaimie DeRosa, MD, Chair, 2014  
 Theda C. Kontis, MD, Sr. Advisor  
 Jamil Asaria, MD, 2012  
 Kofi O. Boahene, MD, 2012  
 Anthony E. Brissett, MD, 2012  
 Samson J. Lee, MD, 2012  
 Marcus W. Moody, MD, 2012  
 Krista L. Olson, MD, 2012  
 Travis T. Tollefson, MD, 2012  
 Minas Constantinides, MD, 2013  
 Fred G. Fedok, MD, 2013  
 Ryan M. Greene, MD, 2103  
 John F. Hoffmann, MD, 2013  
 William D. Losquadro, MD, 2103  
 David V. Martini, MD, 2013  
 Taha Z. Shipchandler, MD, 2013  
 Ife O. Sofola, MD, 2013  
 Andrew A. Winkler, MD, 2013  
 Jared J. Christophel, MD, 2014  
 Mahdi A. Shkookani, MD, 2014  
 Richard Zumalan, MD, 2014  
 Fatima Porter-EL, staff liaison

#### **FELLOWSHIP COMMITTEE (FELLOWSHIP RESEARCH REVIEW SUBCOMMITTEE)**

J. David Kriet, MD, Chair, 2012  
 Kevin C. Lunde, MD, Sr. Advisor  
 John S. Rhee, MD, Sr. Advisor  
 Clinton D. Humphrey, MD, 2012  
 Phillip R. Langsdon, MD, 2012  
 Travis T. Tollefson, MD, 2012  
 Timothy Doerr, MD, 2013  
 Paul L. Leong, MD, 2013  
 Oren Friedman, MD, 2014  
 Arnold Lee, MD, 2014  
 W. Matthew White, MD, 2014  
 Fatima Porter-EL, staff liaison

#### **FELLOWSHIP REVIEW COMMITTEE**

(GVP for Education)

Edward H. Farrior, MD, Chair, 2013  
 Ted A. Cook, MD, Sr. Advisor  
 Stephen W. Perkins, MD, Sr. Advisor  
 Theda C. Kontis, MD, Chair, Fellowship  
 Committee, Ex-officio, 2012  
 Richard E. Davis, MD, 2012  
 Edward H. Farrior, MD, 2012  
 Steven J. Pearlman, MD, 2012  
 Scott A. Tatum, III, MD, 2012  
 John L. Frodel, Jr., MD, 2013  
 Craig S. Murakami, MD, 2013  
 Corey S. Maas, MD, 2013  
 Stephen S. Park, MD, 2013  
 Vito C. Quatela, MD, 2013  
 Tessa Hadlock, MD, 2014  
 Harry Mittelman, MD, 2014  
 Fatima Porter-EL, staff liaison

#### **INDUSTRY RELATIONS COMMITTEE**

(TILC) (Immediate Past President)

Jonathan M. Sykes, MD, Chair, 2012  
 Peter A. Hilger, MD, Sr. Advisor  
 Paul J. Carniol, MD, 2012  
 Steven H. Dayan, MD, 2012  
 Mary Lynn Moran, MD, 2012  
 Tom D. Wang, MD, 2013  
 Robert Kellman, MD, 2014  
 Ann H. Jenne, staff liaison

#### **MAINTENANCE OF CERTIFICATION COMMITTEE (MOC)**

(GVP for Education)

Harley Dresner, MD, Chair, 2014  
 G. Richard Holt, MD, Sr. Advisor  
 Daniel G. Danahey, MD, 2012  
 David B. Hom, MD, 2012  
 Sam M. Lam, MD, 2012  
 David W. Kim, MD, 2012  
 Theda C. Kontis, MD, 2012  
 Philip J. Miller, MD, 2012  
 Sam P. Most, MD, 2012  
 Ira D. Papel, MD, 2012  
 Michael J. Brenner, MD, 2014  
 Edward W. Chang, MD, 2014  
 Michael A. Carron, MD, 2014  
 Brian S. Jewett, MD, 2014  
 Kate E. McCarn, MD, 2014  
 Caryl Bryant, staff liaison

**RESEARCH COMMITTEE**

(GVP for Research, Awards and Development)

Sam P. Most, MD, Chair, 2012  
 Roger A. Allcroft, MD, Sr. Advisor  
 David B. Hom, MD, Sr. Advisor  
 Mark K. Wax, MD, Sr. Advisor  
 Leslie Bernstein, MD, DDS (Life Member)  
 Michael J. Brenner, MD, 2012  
 Jaimie DeRosa, MD, 2012  
 J. Randall Jordan, MD, 2012  
 Paul L. Leong, MD, 2012  
 Marcus W. Moody, MD, 2012  
 Benjamin C. Marcus, MD, 2012  
 W. Matthew White, MD, 2012  
 Michael G. Brandt, MD, 2013  
 Tessa A. Hadlock, MD, 2013  
 James M. Ridgway, MD, 2013  
 Jeffrey H. Spiegel, MD, 2013  
 Prabhat K. Bhama, MD, 2014  
 Douglas K. Henstrom, MD, 2014  
 Paul K. Holden, MD, 2014  
 Lisa M. Ishii, MD, 2014  
 Matthew A. Kienstra, MD, 2014  
 Jennifer C. Kim, MD, 2014  
 Jeffrey S. Moyer, MD, 2014  
 Shepherd G. Pryor, MD, 2014  
 P. Daniel Ward, MD, 2014  
 Charles R. Woodard, MD, 2014  
 Maria Atkins, staff liaison

**SPECIALTY SURGERY COMMITTEE**

(GVP for Research, Awards and Development)

Mark K. Wax, MD, Administrative Chair

**SPECIALTY SURGERY COMMITTEE (CLEFT LIP/CLEFT PALATE SUBCOM.)**

Randolph B. Capone, MD, Chair, 2012  
 Karl J. Eisbach, MD, Sr. Advisor  
 Scott A. Tatum, III, MD, Sr. Advisor  
 Tom D. Wang, MD, Sr. Advisor  
 Sidney Butts, MD, 2012  
 Daniel G. Danahey, MD, 2012  
 Eric J. Dobratz, MD, 2012  
 Jared J. Christophel, MD, 2013  
 Laura E. Hetzler, MD, 2013  
 Lamont Jones, MD, 2013  
 Taha Z. Shipchandler, MD, 2013  
 Kate E. McCarn, MD, 2014  
 Christian Stallworth, MD, 2014  
 Scott J. Stephan, MD, 2014  
 Ann H. Jenne, staff liaison

**SPECIALTY SURGERY COMMITTEE (CRANIOMAXILLOFACIAL SUBCOM.)**

Timothy Doerr, MD, Chair, 2012  
 Daniel G. Danahey, MD, Sr. Advisor  
 Mario J. Imola, MD, Sr. Advisor  
 Scott A. Tatum, III, MD, Sr. Advisor  
 John Y. Kim, MD, 2012  
 William E. Walsh, MD, 2012  
 Babak Azizzadeh, MD, 2013  
 Ritvik P. Mehta, MD, 2014  
 Lisa M. Morris, MD, 2014  
 Mahdi A. Shkoukani, MD, 2014  
 Dana S. Smith, MD, 2014  
 Ann H. Jenne, staff liaison

**SPECIALTY SURGERY COMMITTEE (MICROVASCULAR AND RECONSTRUCTIVE SURGERY SUBCOM.)**

Babak Azizzadeh, MD, Chair, 2014  
 Patrick J. Byrne, MD, Sr. Advisor  
 Yadro Ducic, MD, Sr. Advisor  
 Mark K. Wax, MD, Sr. Advisor  
 Sidney Butts, MD, 2012  
 Michael Fritz, MD, 2012  
 Ryan N. Heffelfinger, MD, 2012  
 Tang Ho, MD, 2012  
 Jason H. Kim, MD, 2012  
 Vishad Nabili, MD, 2013  
 Joshua D. Rosenberg, MD, 2013  
 Steven Canady, MD, 2014  
 Tamer A.H. Ghanem, MD, 2014  
 Jeffrey S. Moyer, MD, 2014  
 Daniel S. Schneider, MD, 2014  
 Judith M. Skoner, MD, 2014  
 Ann H. Jenne, staff liaison

**SPECIALTY SURGERY COMMITTEE (VASCULAR BIRTHMARKS SUBCOM.)**

Wm. Russell Ries, MD, Chair, 2014  
 Marcelo Hochman, MD, Sr. Advisor  
 Stephen S. Smith, MD, Sr. Advisor  
 Sidney Butts, MD, 2012  
 Jared J. Christophel, MD, 2014  
 Clinton D. Humphrey, MD, 2014  
 Mark F. Rounds, MD, 2014  
 P. Daniel Ward, MD, 2014  
 Ann H. Jenne, staff liaison

**STRATEGIC DEVELOPMENT COMMITTEE (GVP for Research, Awards and Development)**

William H. Truswell, MD, Chair, 2012  
 H. Devon Graham, MD, Sr. Advisor  
 Devinder S. Mangat, MD, Sr. Advisor  
 Harrison C. Putman, III, MD, Sr. Advisor  
 Robert L. Simons, MD, Sr. Advisor  
 Andrew C. Campbell, MD, 2012  
 Paul J. Carniol, MD, 2012  
 Robert J. Chiu, MD, 2012  
 Carla C. Graham, MD, 2012  
 Andrew A. Jacono, MD, 2013  
 Jonathan Kolbersh, MD, 2013  
 Thomas T. Le, MD, 2013  
 Alan Burke, MD, 2014  
 J. Madison Clark, MD, 2014  
 Payam Daneshrad, MD, 2014  
 Sachin S. Parikh, MD, 2014  
 Jacob D. Steiger, MD, 2014  
 Ann H. Jenne, staff liaison

**STRATEGIC PLANNING COMMITTEE**

(Immediate Past President)

Jonathan M. Sykes, MD, Chair, 2012  
 Tom D. Wang, MD, 2013  
 Robert M. Kellman, MD, 2014  
 Steve Duffy, staff liaison

**11TH INTERNATIONAL SYMPOSIUM COMMITTEE (GVP for Education)**

Jonathan M. Sykes, MD, Symposium Chair  
 Anthony P. Sclafani, MD, Program Chair  
 Caryl Bryant, staff liaison

## AAFPRS Foundation Committee Charges 2011-2012

*The charges for each committee are those provided in the Bylaws or established as standing charges by virtue of past actions of the Foundation Board.*

### AWARDS COMMITTEE

Recommends criteria for all awards to the Foundation Board; works with staff to publicize awards; selects award recipients; coordinates with the Fellowship Research Review subcommittee for recommendation of the Roe and Gillies awards; and may make recommendations concerning other new awards to Foundation or Academy Board.

### CME COMMITTEE

Reviews the overall CME program; sets CME educational standards; makes recommendations to the Foundation Board for courses to be scheduled; designs and evaluates individual courses to be offered for CME credit each year; assesses educational needs and creates objectives for CME activities; reviews financial statements from courses and the CME program as a whole; recommends policies to the Foundation Board regarding the CME program; sets location and dates of courses; seeks course directors and faculty members as appropriate to the topic and content of individual courses; and reviews member proposals for courses.

### ENDOWMENT INVESTMENT

Handles the investment of endowment funds, which are recommended to the Foundation Board. The six-person committee consists of the treasurer, treasurer-elect, executive vice president, two fellows of the Academy, and a chair appointed by the Foundation Board of directors. The chair and Academy fellows serve a three-year term and may be reappointed. This committee will report to the Foundation Board of directors at least annually.

### EVIDENCE-BASED MEDICINE COMMITTEE

Develops short and long term strategies to implement evidenced-based medicine into our culture.

### FACE TO FACE COMMITTEE

Develops recommendations and programming which offer the services of

AAFPRS members on a pro bono basis; works with the Cleft Lip/Cleft Palate, Craniomaxillofacial and Microvascular committees regarding outreach programs.

### FELLOWSHIP COMMITTEE

As a full committee and via recommendations of its two subcommittees (Fellowship Curriculum and Fellowship Research Review), the committee recommends overall policies and procedures of the Fellowship Program to the Foundation Board of Directors; encourages participation in the fellowship program; and recommends to the Foundation Board of Directors a curriculum for the fellowship program. The Fellowship Research Review Subcommittee reviews all fellowship abstracts and papers and selects the winners for the John Orlando Roe and Sir Harold Delf Gillies Awards. The Fellowship Curriculum Subcommittee reviews and produces up-to-date study materials for the end-fellowship exam.

### FELLOWSHIP REVIEW COMMITTEE

As a full committee, it recommends policies and procedures for review of all fellowship programs; recommends directors to the Foundation Board of Directors; reviews the work of all directors; and provides documentation as needed to pursue accreditation for the fellowship program in conjunction with the Fellowship Committee.

### FOUNDERS CLUB

Helps support the creation of an international education and training program; helps collect, retain, and display historical memorabilia instructive on the subject of the development of facial plastic surgery; and helps support fund raising for the Foundation and other projects and tasks which are consistent with the Foundation's programs.

### MAINTENANCE OF CERTIFICATION

Works with certifying boards to disseminate information to AAFPRS members on MOC requirements; designs and develops MOC materials for courses, distance learning, and other means; coordinates all AAFPRS committees and staff activities relative to MOC; and recommends policies and procedures to the Foundation Board regarding MOC.

### RESEARCH COMMITTEE

Recommends to Foundation Board of Directors criteria, encourages entries, and selects winners for the Resident Research, Investigator Development, and the Bernstein Research Grants; oversees all research activities and encourages research in facial plastic surgery at all levels; identifies research topics in facial plastic surgery and makes recommendations to the Foundation or Academy Board of Directors.

### SPECIALTY SURGERY COMMITTEE

#### *Cleft Lip/Palate Subcommittee.*

Develops recommendations for programming that result in providing cleft lip and palate training; works with the FACE TO FACE committee to identify possible outreach programs.

#### *Craniomaxillofacial Subcommittee.*

Develops recommendations and programming to provide training in craniofacial anomalies, skull base surgery and other maxillofacial procedures; works with the FACE TO FACE committee to identify potential outreach programs to exchange information and technology and to provide opportunities for surgical experience; develops a working relationship with the Surgical Workshop Studies Committee.

#### *Microvascular and Reconstructive Subcommittee.*

Provides a more formalized forum and outlet for microvascular and major reconstructive head and neck surgery issues within the AAFPRS community and beyond.

#### *Vascular Anomalies Subcommittee.*

Shares information and provides a scientific forum to discuss the treatment and management of patients with anomalies and vascular birthmarks.

### STRATEGIC DEVELOPMENT

Works in partnership with the AAFPRS and the Foundation Board. The Board is responsible for ensuring that the organization's mission is carried out, and of necessity, the Strategic Development Committee finds the resources to do so.

### STRATEGIC PLANNING

Develops short and long term strategies to meet the goals of the Academy of Foundation.

## Fellowship Program

The Fellowship Program of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery is widely respected by the medical community and represents the finest post-graduate program in the world for the training of facial plastic surgeons. Since its beginning in 1969, this program has prepared more than 500 highly specialized experts to be educators and leaders in facial plastic surgery. These individuals and their fellowship directors have performed a tremendous service to the Academy and the specialty through the development and dissemination of new procedures, improvement of patient care, refinement of surgical techniques, and the promotion of confidence in and respect for the specialty.

Fellowship directors are recognized authorities in the teaching and practice of facial plastic surgery. They are private practitioners, academicians, or a combination of both. Applicants are encouraged to choose directors whose practice and teaching best supplement their residency training and future practice plans and teaching interests. Although the clinical experience may vary according to individual director's interest and experience, the fellowship criteria and curriculum, including videotapes, provide a common base for the program. Applicants indicate to which directors they want their applications sent and are encouraged to directly contact the directors who have received their applications. As directors review applications, they contact applicants directly to set interviews.

All programs follow a standard curriculum. Oral and written examinations are administered after the completion of a 12-month fellowship. To be eligible, applicants must have completed a residency in otolaryngology or plastic surgery that is approved by the Accreditation Council for Graduate Medical Education or be board-certified by the American Board of Otolaryngology or the American Board of Plastic Surgery.

Contact the Academy office (703) 299-9291, ext. 228 for more information regarding the following fellowship directors and their programs.

### Fellowship Directors

Peter A. Adamson, MD, Toronto, Ontario  
 Daniel S. Alam, MD, Cleveland, OH  
 Babak Azizzadeh, MD, Beverly Hills, CA  
 Shan R. Baker, MD, Ann Arbor, MI  
 William H. Beeson, MD, Indianapolis, IN  
 Gregory H. Branham, MD, St. Louis, MO  
 Patrick J. Byrne, MD, Baltimore, MD  
 Minas Constantinides, MD, New York, NY  
 Ted A. Cook, MD, Portland, OR  
 Peter D. Costantino, MD, New York, NY  
 Richard E. Davis, MD, Miami Beach, FL  
 Yadro Ducic, MD, Fort Worth, TX  
 Karl J. Eischach, MD, Albuquerque, NM  
 David A.F. Ellis, MD, Toronto, Ontario  
 Edward H. Farrior, MD, Tampa, FL  
 Andrew S. Frankel, MD, Beverly Hills, CA  
 Alvin I. Glasgold, MD, Highland Park, NJ  
 Mark J. Glasgold, MD, Highland Park, NJ  
 Robert A. Glasgold, MD, Highland Park, NJ  
 Michael S. Godin, MD, Richmond, VA  
 Tessa A. Hadlock, MD, Boston, MA  
 Peter A. Hilger, MD, Edina, MN  
 Andrew A. Jacono, MD, Great Neck, NY  
 Brian S. Jewett, MD, Miami, FL  
 Calvin M. Johnson, Jr., MD, New Orleans, LA  
 Sheldon S. Kabaker, MD, Oakland, CA  
 Gregory S. Keller, MD, Santa Barbara, CA  
 Robert M. Kellman, MD, Syracuse, NY  
 Russell W.H. Kridel, MD, Houston, TX  
 Keith A. LaFerriere, MD, Springfield, MO

Wayne F. Larrabee, Jr., MD, Seattle, WA  
 William Lawson, MD, DDS, New York, NY  
 Timothy Lian, MD, Shreveport, LA  
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 Devinder S. Mangat, MD, Cincinnati, OH  
 Lawrence J. Marentette, MD, Ann Arbor, MI  
 E. Gaylon McCollough, MD, Gulf Shores, AL  
 Harry Mittelman, MD, Menlo Park, CA  
 Sam P. Most, MD, Stanford, CA  
 Jeffrey S. Moyer, MD, Livonia, MI  
 Craig S. Murakami, MD, Seattle, WA  
 Paul S. Nassif, MD, Beverly Hills, CA  
 Ira D. Papal, MD, Baltimore, MD  
 Steven J. Pearlman, MD, New York, NY  
 Stephen W. Perkins, MD, Indianapolis, IN  
 Vito C. Quatela, MD, Rochester, NY  
 Jeffrey Rawnsley, MD, Los Angeles, CA  
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 Daniel E. Rousso, MD, Birmingham, AL  
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 Fred J. Stucker, MD, Shreveport, LA  
 Michael J. Sullivan, MD, Columbus, OH  
 Jonathan M. Sykes, MD, Sacramento, CA  
 Sherard A. Tatum, III, MD, Syracuse, NY  
 J. Regan Thomas, MD, Chicago, IL  
 Dean M. Toriumi, MD, Chicago, IL  
 Tom D. Wang, MD, Portland, OR  
 Mark K. Wax, MD, Portland, OR  
 Edwin F. Williams, III, MD, Albany, NY  
 Brian J. Wong, MD, Irvine, CA

### Upcoming AAFPRS Meetings and Courses

**JANUARY 18-22**  
**REJUVENATION OF THE AGING FACE**  
 Co-chairs: Mary Lynn Moran, MD and  
 Sam P. Most, MD  
 San Diego, CA

**MARCH 5-9**  
**CARIBBEAN FACIAL PLASTIC**  
**SURGERY UPDATE**  
 (Endorsed by the AAFPRS)  
 Directors: Stephen W. Perkins, MD and  
 Capi Wever, MD  
 San Juan, PR

**APRIL 18-22**  
**COMBINED OTOLARYNGOLOGICAL**  
**SPRING MEETINGS (COSM)**  
 (AAFPRS SESSION, APRIL 18-19)  
 Co-chairs: Scott A. Tatum, III, MD and  
 Benjamin C. Marcus, MD  
 San Diego, CA

**MAY 9-12**  
**THE 7th INTERNATIONAL MEETING**  
**IN FACIAL PLASTIC SURGERY**  
 "Nose and Face World"  
 Rome, Italy  
 Co-Sponsors: IFFPSS, EAFPS, and  
 AAFPRS

**SEPTEMBER 5-8**  
**FALL MEETING**  
 Co-chairs: Craig S. Murakami, MD and  
 Daniel S. Alam, MD  
 Washington, DC

## Grants and Awards

*Coordinated by the Research Committee of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery. Since 2002, the AAFPRS Foundation has participated with the AAO-HNS' Centralized Otolaryngology Research Efforts (C.O.R.E.)*

*To accomplish the objective of educating investigators to prepare competitive grant applications we will be abiding by C.O.R.E.'s standards and application guidelines. Please refer to [www.entnet.org](http://www.entnet.org) for the grants and application form.*

### The LESLIE BERNSTEIN GRANTS PROGRAM

#### RESIDENT RESEARCH GRANT

Two resident research grants up to \$5,000 each may be awarded to residents who are AAFPRS members. The purpose of this grant is to stimulate resident research in projects that are well conceived and scientifically valid. Residents are encouraged to enter early in their training so that their applications may be revised and resubmitted if not accepted the first time. Residents at any level may apply, even if the research work will be done during their fellowship year. The Resident Research Grant may be integrated with other funding to complete a project.

#### INVESTIGATOR DEVELOPMENT GRANT

The Investigator Development Grant of up to \$15,000 supports the work of a young faculty member in facial plastic surgery conducting significant clinical or laboratory research and the training of resident surgeons in research. The applicant must be an AAFPRS member.

#### THE BERNSTEIN GRANT

This \$25,000 research grant may be presented annually to any AAFPRS member to undertake research that will advance facial plastic and reconstructive surgery. The award is endowed by a grant from Leslie Bernstein, MD, DDS. The research must be original and grants may be used as seed-money for research projects.

*Coordinated by the Awards Committee of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery*

#### BEN SHUSTER MEMORIAL AWARD

The Ben Shuster Memorial Award is presented for the most outstanding research paper by a resident or fellow in training on any clinical work or research in facial plastic and reconstructive surgery delivered at a national meeting (or its equivalent) between March 1 and the following February 28. Each entrant must be the sole or senior author and an AAFPRS member. Studies prepared during the first year after completion of residency training will be considered, provided research was conducted during the author's residency or fellowship. A certificate and an award of \$1,000 are presented.

*For more information concerning guidelines and research and awards requirements, deadlines and application forms please go directly to the Academy's Web site [www.AAFPRS.org](http://www.AAFPRS.org) and click on Awards & Grants under the Physician's section.*

*All nominations for the Community Service, F. Mark Rafaty Memorial, John Dickinson Teacher, and William K. Wright Awards may be submitted by AAFPRS members to the Awards Committee no later than February 1.*

#### IRA TRESLEY RESEARCH AWARD

The Ira Tresley Research Award recognizes the best original research in facial plastic surgery by an AAFPRS member who has been board certified for at least three years. Papers presented at a national meeting (or its equivalent) between March 1 and the following February 28, are eligible for this award. A certificate and an award of \$1,000 are presented.

#### JOHN ORLANDO ROE AWARD\*

A certificate and an award of \$1,000 will be presented each year to the graduate fellow who submits the best clinical research paper written during fellowship.

#### SIR HAROLD DELF GILLIES AWARD\*

A certificate and an award of \$1,000 will be presented each year to the graduate fellow who submits the best basic science research paper written during fellowship.

\*The Roe and Gillies Awards are automatically selected from papers submitted by Academy fellows during their fellowship year.

#### WILLIAM WRIGHT AWARD

This award may be presented each year to an AAFPRS member who has made outstanding contributions to facial plastic and reconstructive surgery.

#### COMMUNITY SERVICE AWARD

This award may be presented annually to an AAFPRS member who has distinguished himself/herself by providing and/or making possible free medical service to the poor in his/her community.

#### F. MARK RAFATY MEMORIAL AWARD

This award may be presented each year to an AAFPRS member who has made outstanding contributions to facial plastic and reconstructive surgery.

#### JOHN DICKINSON TEACHER OF THE YEAR AWARD

This award honors an AAFPRS fellow member for sharing knowledge about facial plastic and reconstructive surgery with the effective use of audiovisuals in any one year. The Awards Committee seeks nominations from the Electronic Media Subcommittee each year.

#### RESIDENCY TRAVEL AWARD

Two Residency Travel Awards of \$500 each may be awarded to the most outstanding paper in facial plastic and reconstructive surgery primarily authored by a resident or medical student in training. The paper must be submitted by February 1 for consideration, and to be presented at that year's Fall Meeting.

*Coordinated by the International Symposium Committee and the AAFPRS Foundation Board of Directors.*

#### EFRAIN DAVALOS AWARD

The Efrain Davalos Award is an international award which may be presented every four or five years in conjunction with the Foundation's International Symposia. The award recognizes those outside the U.S. and Canada who have made a significant contribution to facial plastic surgery.

## BYLAWS

### of the Educational and Research Foundation of the American Academy of Facial Plastic and Reconstructive Surgery

#### Article I

##### OBJECTIVES AND PURPOSES

The purposes of the Foundation, in addition to the purposes and limitations contained in its Certificate of Incorporation, are exclusively to foster, promote, support, augment, develop, and encourage investigative knowledge and charitable and humanitarian application of facial plastic and reconstructive surgery; to encourage the teaching and education of this medical specialty by developing, publishing, and copyrighting educational materials to promote specialized training for medical personnel in facial plastic and reconstructive surgery; to foster, promote, support, augment, develop and encourage education of non-medical personnel engaged in scientific endeavors relating to the field of facial plastic and reconstructive surgery; exclusively to foster, promote, support, develop; and encourage educational, charitable, humanitarian, and scientific purposes, provided, however, no part of the net earnings of the Foundation shall inure to the benefit of any private shareholder or individual; no substantial part of the activities of the Foundation is carrying on propaganda or otherwise attempting to influence legislation; and the Foundation shall not participate in, or intervene in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office. The Foundation shall possess all powers which a corporation organized under the Federal Not-For-Profit Corporation Act of the State of Illinois, as the same from time to time may be amended, shall possess; all powers which are not in conflict with the previously mentioned purposes for which the Foundation is organized, including but not limited to the power to purchase, take, receive, lease as lessee or lessor, take by gift, devise or bequest, or otherwise acquire, own, hold, use, invest in, and otherwise deal in and with any real or personal property or any interest therein situated in or out of the State of Illinois; sell, convey, pledge, mortgage, assign, and otherwise transfer or dispose of all or any part of its property and assets; from time to time to use, distribute, contribute, expend, donate, apply and appropriate all of its property and assets, and all proceeds and avails thereof and income and profit derived therefrom exclusively for charitable or scientific purposes; provided, however, the Foundation shall not engage in any business which would disqualify it from being exempt from taxation under Sections 501(a) or (c)(3) of the Internal Revenue Code of 1954, as amended, or any subsequent law of the United States of America.

#### Article II

##### MEMBERSHIP

###### Section 1. Members

The board of directors may establish membership categories and criteria for membership. For purposes of these bylaws, members of the American Academy of Facial Plastic and Reconstructive Surgery (hereinafter "the Academy") shall also be considered members of the Foundation and shall adhere to all the requirements and categories of membership of the Academy.

###### Section 2. Resignation

A member may resign at any time by written resignation filed with the secretary of the Foundation, and a member may be

removed for cause by the affirmative vote of a majority of the whole board of directors.

#### Article III

##### BOARD OF DIRECTORS

###### Section 1. General Powers

The corporate powers, property, and affairs of the Foundation shall be exercised, conducted, and controlled by its board of directors. The board of directors shall be the overall policy making body of the Foundation and shall have overall responsibility for the programs and business of the Foundation.

###### Section 2. Structure

The board of directors shall consist of the following officers of the American Academy of Facial Plastic and Reconstructive Surgery (hereinafter "the Academy"): the president, immediate past president, president-elect, secretary, treasurer, group vice president for education and group vice president for research, awards and development, and one public member appointed by the board. The group vice president for membership and society relations, the group vice president for regulatory and public affairs, and the executive vice president of the Academy shall be members of the Foundation's board of directors without vote.

###### Section 3. Board Selection and Tenure

The terms of office for directors from the Academy shall be for the duration of their terms as officers in those capacities of the Academy. The public member shall be appointed to a term of one year and may be re-appointed for two additional one-year terms.

###### Section 4. Regular Meetings

Three regular meetings of the board of directors shall be held each year in conjunction with Academy executive committee meetings. The board of directors may provide by resolution the time and place to hold additional regular meetings of the board without other notice than such resolution.

###### Section 5. Special Meetings

Special meetings of the board of directors may be called by the president or by a majority of the directors. The person or persons authorized to call special meetings of the board may fix the time and place to hold any special meetings of the board called by them.

###### Section 6. Notices

Notice of any regular, special, or telephone meeting of the board of directors shall be sent to each director not less than fifteen days before such meeting. Notice may be waived in writing by a director either before or after a meeting. Neither the business to be transacted at nor the purpose of any regular or special meeting of the board need be specified in the notice or waiver of notice of such meeting.

###### Section 7. Quorum

A majority of the board of directors shall constitute a quorum. A majority of the quorum at any meeting of the board shall consti-

tute action by the board unless otherwise provided by law or by these bylaws.

#### **Section 8. Offices and Place of Meeting**

The directors may hold their meetings and have one or more offices and keep the books and records of the Foundation at any office of the Foundation or at such place or places as the board of directors may from time to time determine, either within or without the state of Illinois.

#### **Section 9. Vacancy**

Any vacancy occurring in the board of directors shall be filled by the Foundation.

#### **Section 10. Compensation**

Directors shall not receive compensation for their services, but by action of the board of directors, reimbursement of expenses may be allowed for attendance at meetings of the board or for official representation of the Foundation.

#### **Section 11. Action Without Meeting**

Any action required or permitted to be taken at a meeting of the board of directors may be taken without a meeting if a consent in writing, setting forth the action to be taken, is signed by all directors entitled to vote.

#### **Section 12. Telephone Meetings**

Meetings may be conducted by telephone provided that all directors participating in such telephone meetings may communicate with each other. A majority of directors shall constitute a quorum for telephone meetings, and the act of the majority of the quorum shall constitute action by the board.

#### **Section 13. Indemnification**

The Foundation shall indemnify any and all of its present and former directors, officers, employees, agents, committee members, or any person who may have served at its request or by election as a director or officer of another corporation or association in accordance with policies adopted from time to time by the board of directors.

### **Article IV OFFICERS**

#### **Section 1. Number and Identification of Officers — Election, Term of Office, and Removal**

The officers of the Foundation shall be a president, president-elect, treasurer, secretary, group vice president for education, group vice president for research, awards, and development, executive vice president, and such other officers as the board of directors may from time to time determine. The president, president-elect, secretary, treasurer, group vice president for education, group vice president for research, awards, and development, and executive vice president of the Academy shall serve as president, president-elect, secretary, treasurer, group vice president for education, group vice president for research, awards, and development, and executive vice president of the Foundation by virtue of their offices.

#### **Section 2. President**

The president shall be the chief spokesperson for the Foundation. The president shall preside at all meetings of the board of directors when he is present and perform all duties incidental to the office of the president and such other duties as may be prescribed by the board of directors from time to time.

#### **Section 3. President-Elect**

The president-elect, in the absence or disability of the president, shall perform the duties and exercise the powers of the president, and shall perform such other duties as the board of directors shall prescribe.

#### **Section 4. Executive Vice President**

The Academy's executive vice president manages the Foundation's programs and business. The executive vice president shall be given the necessary authority and be held responsible for the direction, administration, and coordination of the Foundation in all its activities, subject only to such policy as may be adopted and such orders as may be issued by the board of directors.

#### **Section 5. Group Vice President for Education**

The vice president for education shall be responsible for the supervision and direction of the Foundation's educational activities and shall coordinate the activities of the following committees:

- (a) CME
- (b) Fellowship
- (c) Fellowship Review
- (d) Specialty Surgery

#### **Section 6. Group Vice President for Research, Awards, and Development**

The group vice president for research, awards, and development shall be responsible for the supervision and direction of the Foundation's activities in the areas of research, awards, and development and shall coordinate the activities of the following committees:

- (a) Awards
- (b) Exhibit Advisory
- (c) FACE TO FACE
- (d) Research
- (e) Strategic Development
- (f) Development

#### **Section 7. Secretary**

The secretary ensures that accurate minutes are kept of all board of directors meetings, ensures that all notices are given as required by the Foundation or required by law, and oversees the keeping of a register of the address of each member. The secretary shall perform all duties incidental to the office and such other duties as from time to time may be assigned by the president or board of directors.

## Section 8. Treasurer

The treasurer oversees the administration of all funds, securities, and assets of the Foundation and reports regularly to the board of directors on the Foundation's financial status. The treasurer shall present an annual budget to the board of directors for its review and adoption. The treasurer shall perform other duties incidental to the office as may be prescribed by the board of directors or president.

## Article V COMMITTEES

The board of directors may create standing or special committees with such powers and duties as the board of directors may determine.

### Section 1. Standing Committees

There shall be the following standing committees:

(a) Endowment Investment Committee. The endowment investment committee shall consist of the treasurer, treasurer-elect, the executive vice president, who shall serve ex-officio, an Academy fellow, and a chair appointed by the Foundation board. The chair and Academy fellow serves a three-year term and may be re-appointed. The committee shall report at least annually to the board.

(b) coordinated by the group vice president for education:

- (i) CME
- (ii) Fellowship
- (iii) Fellowship Review
- (iv) Specialty Surgery

(c) coordinated by the group vice president for research, awards, and development:

- (i) Research
- (ii) Awards
- (iii) FACE TO FACE
- (iv) Strategic Development
- (v) Exhibit Advisory

### Section 2. Duties

The duties and responsibilities of standing committees shall be defined by the board of directors if not specified in these bylaws. Unless otherwise specified by the board of directors, actions by the committees are in the nature of advice to the board of directors and do not represent the policies of the Foundation unless and until adopted.

### Section 3. Appointment

The group vice presidents for education and research, awards, and development shall make recommendations to the president-elect for members and chairs of committees under their jurisdiction. The chairs shall have served at least one full year on their respective committees and shall be fellows of the Academy. The president-elect shall submit a list of proposed candidates for committee members and committee chairs for those terms about to expire at the fall meeting of the board for its approval.

## Section 4. Terms

All committee members, unless otherwise specified herein, may serve two, three-year staggered terms. In addition, committee chairmen may serve an additional three-year term. Terms of committee chairs will be staggered. The CME chair serves a two-year term and may be reappointed at the discretion of the Board.

## Section 5. Ad Hoc Committees

Ad hoc committees may be created by the board of directors for a one-year period, unless otherwise specified. The president, with concurrence of the board, shall appoint the members and designate the chair of such committees.

## Section 6. Composition

The size of each standing or ad hoc committee, unless otherwise specified herein, and duties of each committee shall be determined by the board of directors. At each regular meeting of the board of directors, the chair of each standing committee shall deliver the committee's report.

## Article VI ANNUAL REPORT

The Foundation shall prepare an annual report for publication and distribution to the members and other interested persons and organizations.

## Article VII SEAL

The board of directors shall provide a corporate seal, which shall be in the form of a circle and shall have inscribed thereon the name of the Foundation in the outer circle and the word "seal" in the inner circle.

## Article VIII OFFICES

The Foundation shall have such offices in Illinois or elsewhere as may be determined by the directors from time to time.

## Article IX AMENDMENTS

These bylaws may be amended, altered, or repealed, in whole or in part, either

(a) by vote of two-thirds of the members of the board of directors at any regular or special meeting of such board, if written notice of such meeting shall be given as required under the applicable provisions of Article III of these bylaws and if such notice also shall set forth the action proposed with respect to these bylaws, or

(b) by the action taken under the provisions of Section 11 of Article III.

Amended, January 9, 1986

Amended, January 14, 1987

Amended, October 2, 1993

Amended, September 21, 1994

Amended, September 13, 1995

Amended, September 5, 1997

Amended, September 20, 2004



## American Board of Facial Plastic and Reconstructive Surgery (ABFPRS)

115C South St. Asaph Street  
Alexandria, VA 22314  
Phone: (703) 549-3223; Fax: (703) 549-3357  
Web site: [www.abfprs.org](http://www.abfprs.org); E-mail: [lwirth@abfprs.org](mailto:lwirth@abfprs.org)

The American Board of Facial Plastic and Reconstructive Surgery (ABFPRS) certifies surgeons exclusively in facial plastic and reconstructive surgery. A surgeon eligible for ABFPRS certification:

- Has completed an approved residency in one of the two surgical specialties that include identifiable training in all aspects of facial plastic surgery (otolaryngology/head-and-neck surgery or plastic surgery);
- Is double boarded, having earned prior certification in one of those specialties through the American Board of Medical Specialties or the Royal College of Physicians and Surgeons in Canada;
- Has successfully completed a two-day examination;
- Has submitted for peer-review an acceptable record of at least two years' clinical experience, including operative reports of a minimum 100 facial plastic surgeries;
- Operates in an accredited facility; and
- Holds proper licensure and subscribes to the ABFPRS Code of Ethics.

### EXECUTIVE COMMITTEE

Ira D. Papel, MD, President  
Mark V. Connelly, MD, Vice President  
Lee E. Smith, MD, Secretary  
Harrison C. Putman, III, MD, Treasurer  
Shan R. Baker, MD, Immediate Past President

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Missy Harp, Finance, Test, and Administration Manager  
Janice Knouse, Credentials and Administrative Manager

The ABFPRS examination also is a component of the AAFPRS Foundation Fellowship Program.

## International Federation of Facial Plastic Surgery Societies



The International Federation of Facial Plastic

Surgery Societies (IFFPSS) is a group of societies of facial plastic surgeons from various countries around the world. This Federation was formed in 1997 after extensive discussions initiated by the American Academy of Facial Plastic and Reconstructive Surgery. The member societies of the IFFPSS are:

- American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS)
- ASEAN Academy of Facial Plastic and Reconstructive Surgery (ASEAN)
- Australasian Academy of Facial Plastic Surgery (AAFPS)
- Brazilian Academy of Facial Plastic Surgery (BAFPS)
- Canadian Academy of Facial Plastic and Reconstructive Surgery (CAFPRS)
- Colombian Society of Facial Plastic Surgery and Rhinology (CSFPRS)
- European Academy of Facial Plastic Surgery (EAFPS)
- Mexican Society of Rhinology and Facial Surgery (MSRFS)
- Pan Asia Academy of Facial Plastic and Reconstructive Surgery (PAAFPRS)
- Taiwan Academy of Facial Plastic and Reconstructive Surgery (TAFPRS)
- Venezuela Society of Rhinology and Facial Plastic Surgery (VSRFSS)

The activities of the IFFPSS are governed by the Board of Directors, which meets on a semi-annual basis. Each charter member society and full member society is represented by two delegates to the Board of Directors, usually its current president and one other delegate. Associate member society is represented by one delegate to the Board of Directors. The ongoing efforts are coordinated by the Executive Committee of the Board of Directors.

The present members of the Executive Committee are:

President	Wayne F. Larrabee, Jr., MD (AAFPRS)
Past President	Roxana Cobo, MD (CSFPRS)
Vice President	Jose Juan Montes B., MD (MSRFS)
Secretary	Pietro Palma, MD (EAFPS)
Treasurer	Tuan Pham, MD (AAFPS)

## Fellowship Examination Dates

All surgeons who participate in the Fellowship Program of the Educational and Research Foundation for the AAFPRS must take an oral and written examination, which is administered by the American Board of Facial Plastic and Reconstructive Surgery. Passing the examination is not only a requirement for completion of a fellowship, but also one requirement for certification by the ABFPRS. For details about the ABFPRS examination and certification programs, visit: [www.abfprs.org](http://www.abfprs.org).

Fellowship Completion Date	Examination Date	Location
June 2012	June 16-17, 2012	Washington, DC
June 2013	June 22-23, 2013	Washington, DC
June 2014	June 14-15, 2014	Washington, DC

**CAPITAL CAMPAIGN: *The Many Faces of Generosity ... Facing the Future and Beyond***

**MEMBER DONORS**

The Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery would like to thank the following member donors (as of December 12, 2011) whose contributions have helped us to be on our way to exceeding our \$4M goal!

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## AAFPRS Staff Contact List

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### ACTIVITIES AND PROGRAMS

### STAFF LIAISON

Accounts receivable .....	Amy McFee
Accounts payable .....	Amy McFee
Advertising .....	Rita Chua Magness
Awards committee .....	Michelle Busey
Bank deposits .....	Amy McFee
Banking relations .....	Amy McFee
Board of Directors - AAFPRS .....	Stephen C. Duffy
Board of Directors - ERF .....	Stephen C. Duffy
BOD monthly report .....	Stephen C. Duffy
BOD and ERF minutes .....	Stephen C. Duffy
Certificate orders for Fellows, Members, and International Members .....	Maria Pettiford Atkins
Certificate orders for completed fellowships .....	Fatima Porter-EL
CME certificates and documentation .....	Caryl Bryant/Ollie Edwards
CME committee/subcommittee support .....	Caryl Bryant
CME compliance .....	Caryl Bryant
CME documentation .....	Caryl Bryant
Committee organization .....	Stephen C. Duffy
Computer management .....	Stephen C. Duffy
Courses .....	Caryl Bryant
Curriculum Bibliography .....	Fatima Porter-EL
Development/Fundraising .....	Ann H. Jenne
Directory .....	Rita Chua Magness
Domestic Violence .....	Ann H. Jenne/Michelle Busey
Ethics Issues .....	Stephen C. Duffy
Executive Committee - AAFPRS .....	Stephen C. Duffy
Exhibits .....	Ollie Edwards
FACE TO FACE .....	Ann H. Jenne
Faces of Honor .....	Ann H. Jenne
Fall meeting .....	Caryl Bryant/Ollie Edwards
Fall program .....	Caryl Bryant
Financial statements and matters .....	Amy McFee
FPST editorial .....	Stephen C. Duffy/Rita Chua Magness
FPST promotion, production .....	Rita Chua Magness
FPST subscription and fulfillment .....	Michelle Busey
FPT editorial .....	Stephen C. Duffy/Rita Chua Magness
FPT production .....	Rita Chua Magness
Fellowship applications and information .....	Fatima Porter-EL

ACTIVITIES AND PROGRAMSSTAFF LIAISON

Fellowship director application and information .....	Fatima Porter-EL/Stephen C. Duffy
Fellowship program coordination .....	Fatima Porter-EL
Founders Club .....	Ann H. Jenne/Stephen C. Duffy
Fundraising/Development .....	Ann H. Jenne
Government and regulatory affairs (Federal or State) .....	Stephen C. Duffy
Grants (Research) .....	Maria Pettiford Atkins
Humanitarian Programs .....	Ann H. Jenne
International Federation of FPSS .....	Stephen C. Duffy
International programs (FACE TO FACE) .....	Ann H. Jenne
International Symposia logistics .....	Ollie Edwards/Caryl Bryant
International Symposia program content .....	Caryl Bryant/Ollie Edwards
Learning Center .....	Rita Chua Magness
Legislative Network .....	Stephen C. Duffy
Loan Payment .....	Amy McFee
Mailing list requests .....	Maria Pettiford Atkins
Media outreach: contacts, inquiries, releases .....	Rita Chua Magness
Meeting abstracts .....	Caryl Bryant
Meeting badges, registration packets, supplies .....	Ollie Edwards/Maria Pettiford Atkins
Meeting evaluation forms/billing .....	Caryl Bryant
Meeting and course brochure production .....	Rita Chua Magness
Meeting and course budget .....	Caryl Bryant
Meeting and course confirmation and cancellation letters .....	Michelle Busey
Meeting and course CME compliance .....	Caryl Bryant
Meeting and course exhibitor contact and marketing .....	Ollie Edwards
Meeting and course marketing .....	Rita Chua Magness/Caryl Bryant
Meetings and course monitoring for CME .....	Caryl Bryant
Meeting and course promotional mailings .....	Rita Chua Magness
Meeting and course registration .....	Michelle Busey
Membership application requests .....	Maria Pettiford Atkins
Membership dues and invoicing .....	Maria Pettiford Atkins
Membership services .....	Maria Pettiford Atkins
Membership status verification .....	Maria Pettiford Atkins
Membership credentialling .....	Maria Pettiford Atkins
Office administration .....	Michelle Busey
Order fulfillment (publications and videotapes) .....	Michelle Busey
Organization of Facial Plastic Surgery Assistants Program .....	Ann H. Jenne
Past Presidents Council .....	Stephen C. Duffy/Ann H. Jenne
Personnel .....	Stephen C. Duffy/Amy McFee
Public relations .....	Stephen C. Duffy/Rita Chua Magness
Publications oversight .....	Stephen C. Duffy/Rita Chua Magness
Reception .....	Michelle Busey
Research program .....	Maria Pettiford Atkins
Socioeconomic issues .....	Stephen C. Duffy
Supply inventory and ordering .....	Michelle Busey
Telephone maintenance .....	Michelle Busey
Technology and Industry Leadership Council (TILC) .....	Ann H. Jenne
Videotapes/DVD fulfillment .....	Michelle Busey
Videotapes/DVD production and promotion .....	Rita Chua Magness
Web Site .....	Rita Chua Magness/Stephen C. Duffy
Womens in Facial Plastic Surgery .....	Ann H. Jenne

## AAFPRS Membership

*Although efforts have been made to assure that the information contained in this directory is correct, accuracy cannot be guaranteed. If you find any information that is inaccurate or outdated, please submit the appropriate corrections in writing to the Academy office so that changes may be made to next year's edition.*

*The directory includes the names of those individuals who were current in membership requirements and dues as of the date the directory was sent to press. The current status of any member—fellow, member, associate, resident, emeritus, honorary, presidential, retired or international—is available from the Academy office.*

*If you are ready to upgrade your membership level, please contact the Academy's Membership Department for more information.*

*The extended data (i.e. spouse name, board certification, and membership affiliation) was collected from the membership beginning in July 1998. Those members who did not respond to the recent "call for member data," or who have responded after the deadline, do not have the extended or accurate listing. Please submit your data to the Membership Department for next year's edition. The addresses herein are current as of November 24, 2011.*

## Format for Alphabetical Listing

The alphabetical listing of AAFPRS members has been expanded to include the following data:

Full Name  
 Spouse Name  
 Address  
 Phone Number  
 Fax Number  
 Email Address  
 Membership Type  
 Board Certification  
   ABCS - cosmetic surgery  
   ABD - dermatology  
   ABFPRS - facial plastic surgery  
   ABHRS - hair restoration surgery  
   ABO - ophthalmology  
   ABOMFS - oral maxillofacial surgery  
   ABOto - otolaryngology  
   ABPS - plastic surgery  
   AOBOO - osteopathic and otorhinology  
   EBOMFS - oral maxillofacial surgery (European)

### Membership Affiliation

AACS - American Academy of Cosmetic Surgery  
 AAD - American Academy of Dermatology  
 AADDS - American Academy of Dermatology/Dermatologic Surgery  
 AAFPS - Australasian Academy of Facial Plastic Surgery  
 AAO - American Academy of Ophthalmology  
 AAOA - American Academy of Otolaryngic Allergy  
 AAO-HNS - American Academy of Otolaryngology-HNS  
 ACS - American College of Surgeons  
 ALA - American Laryngological Association  
 AMA - American Medical Association  
 ANS - American Neurotology Society  
 AOA - American Osteopathic Association  
 AOCOO - American Osteopathic College of Ophthalmology and Otorhinology  
 AOS - American Otological Society  
 ARS - American Rhinologic Society  
 ASAPS - American Society of Aesthetic Plastic Surgery  
 ASDS - American Society of Dermatologic Surgery  
 ASHNS - American Society of Head and Neck Surgery  
 ASHRS - American Society of Hair Restoration Surgery  
 ASLMS - American Society of Laser Medicine and Surgery  
 ASLS - American Society of Liposuction Surgery  
 ASOMFS - American Society of Oral Maxillofacial Surgery  
 ASOPRS - American Society of Ophthalmic Plastic and Reconstructive Surgery  
 ASPS - American Society of Plastic Surgeons  
 BSRFPS - Brazilian Society of Rhinology and Facial Plastic Surgery  
 CAFPRS - Canadian Academy of Facial Plastic and Reconstructive Surgery  
 CMA - Canadian Medical Association  
 CSFPSR - Colombian Society of Facial Plastic Surgery and Rhinology  
 CSO-HNS - Canadian Society of Otolaryngology-HNS  
 EAFPRS - European Academy of Facial Plastic and Reconstructive Surgery  
 IFFPSS - International Federation of Facial Plastic Surgery Societies  
 ISHRS - International Society of Hair Restoration Surgery  
 MSRFS - Mexican Society of Rhinology and Facial Surgery  
 RCS - Royal College of Surgeons  
 TrioSoc - Triological Society